

section for locker-key issuance.

- c. If a form is used instead of a stamp or comparable notation on the back of the Form I-385, the officer must record the detainee's name and A-number in addition to the above-required information. The form is maintained in the detainee's detention file.

H. Releases

Facility staff assigned to processing must complete certain procedures before any detainee's release, removal, or transfer from the facility. Necessary steps include, but are not limited to: completing out-processing forms; closing files and fingerprinting; returning personal property; reclaiming facility-issued clothing, identification cards, handbooks, and bedding; and checking wants and warrants. ICE/ERO shall approve all facility release procedures.

1. A detainee's out-processing begins when release processing staff receive the Form I-203, "Order to Detain or Release," signed by an authorizing official.
2. The requesting ICE/ERO official is responsible for having all documentation required for the detainee's release or transfer complete and ready for use by out-processing officers.
3. After verifying the documents, the facility shall use the most expeditious communication system (e.g., public address system) to instruct the detainee to report to the nearest officer.
4. Provide detainee medications and a detailed medical care summary as described in "Medical Records" in Standard "4.3 Medical Care."
5. The officer shall check the wristband of the detainee, who reports as instructed, to verify his/her identity.
6. The officer shall advise the detainee to remove all facility-issued items, including the handbook, supplement and locker key (if issued) and personal property from the housing unit, and

after doing so, to return to the officer for further instruction. If the detainee is physically unable to remove his/her facility-issued and personal items, assistance shall be provided.

7. The officer shall remove the detainee's housing-identification card from the file system and turn it over to the detainee. The detainee will then report to the processing office.
8. At this stage of the detainee's out-processing, the control officer shall remove any Form G-589 receipts from the detainee's detention file. The control officer shall give the Form G-589(s) to the shift supervisor for further action, and send the remaining documents to the processing office.
 - a. The shift supervisor shall compare the information on the blue portion of the Form G-589 with that on the pink triplicate portion and, if they match in all particulars, shall remove the pink copy from its safeguards.
 - b. After verifying the information on each portion of the G-589, the shift supervisor shall remove the funds and valuables from safeguards, attach the two portions of the Form G-589, make the necessary log entries, place the items in a secure container, and deliver the container to the processing officer.
9. When the detainee arrives in the processing office, the processing officer shall verify the detainee's identity, and take physical possession of the housing-identification card, handbook, supplement and locker key (if issued) handed back by the detainee. The officer shall then date and sign the back of the Form I-385 or specified form and remove the bottom portion(s) of the detainee's Form I-77(s).
 - a. The Form I-77 authorizes the removal from storage of the detainee's personal property, as inventoried on the form.
 - b. Before returning the property to the detainee,

the officer shall explain the form and require the detainee to sign his/her name on the bottom of the Form I-77 or on a separate piece of paper. The officer shall compare this signature with the signature on the back of the top portion of the I-77 that is attached to the property. If the signatures appear the same, the officer shall return the items to the detainee.

- c. The detainee shall check his/her property against the original personal property inventory form. If all property is correctly accounted for, the detainee shall sign the inventory sheet, a copy of which the officer shall place in the detainee's detention file. The detainee shall be provided a copy of the signed form upon request.
 - d. If after property is checked against the detainee's property inventory sheet Form G-589, I-77 or equivalent, it is determined that property is missing or unaccounted for, the detainee shall complete a Form I-387 'Report of Detainee's Missing Property' or equivalent. The detainee shall be informed as to how the property shall be returned to him/her when/if it is located. The detainee shall be provided instructions on the appropriate office to contact in order to follow-up on the government's search for the detainee's lost property, in accordance with standard "2.5 Funds and Personal Property."
10. The detainee shall be permitted to change into his or her own clothing in a private part of the processing area, within earshot but not eyeshot. The staff shall:
 - a. instruct the detainee to remove all facility-issued clothing, and to dress in his/her personal clothing;
 - b. inspect the condition and quantity of facility-issued clothing, bedding, etc., surrendered by the detainee;
 - c. place the returned clothing and bedding, excluding the mattress, in the bin designated for soiled items—these shall be laundered and sanitized as appropriate before reuse;
 - d. set aside the plastic-covered or -sheathed mattress for rinse and wipe-down with disinfectant or other solution prescribed by the medical department; and
 - e. in the event property is missing, provide Form I-387 to the detainee.
 11. The processing officer shall compare the blue and pink copies of the Form G-589 with the white copy presented by the detainee. If the detainee's documentation is in order, the officer shall return the detainee's funds and secure the detainee's signature, confirming receipt of the inventoried property on the blue copy of the G-589. The facility shall retain all three copies (blue, pink and white) of the closed-out G-589 in the detainee's detention file.

If the detainee claims to have lost the white portion of the Form G-589, the processing officer shall note this on the blue copy, which he/she and the detainee shall certify by signing immediately below. Staff should ensure that the content of the form is clear and that the detainee is made fully aware of what he/she is signing in a language or other manner which the detainee can understand.

I. Releases or Removals

The time, point and manner of release from a facility shall be consistent with safety considerations and shall take into account special vulnerabilities. Prior to release, the detainee shall be notified of the upcoming release and provided an opportunity to make a free phone call to facilitate release arrangements.

Facilities that are not within a reasonable walking distance of, or that are more than one mile from, public transportation shall transport detainees to

local bus/train/subway stations prior to the time the last bus/train leaves such stations for the day. If public transportation is within walking distance of the detention facility, detainees shall be provided with an information sheet that gives directions to and describes the types of transportation services available. However, facilities must provide transportation for any detainee who is not reasonably able to walk to public transportation due to age, disability, illness, mental health or other

vulnerability, or as a result of weather or other environmental conditions at the time of release that may endanger the health or safety of the detainee.

Detainees will be provided with a list of legal, medical, and social services that are available in the release community, and a list of shelter services available in the immediate area along with directions to each shelter. Detainees will be released with one set of non-institutionalized, weather-appropriate clothing.

2.2 Custody Classification System

I. Purpose and Scope

This detention standard protects detainees, staff, contractors, volunteers and the community from harm, and contributes to orderly facility operations, by requiring a formal classification process for managing and separating detainees based on verifiable and documented data.

In accordance with the requirements and guidelines of this detention standard, each facility is required to have in place a formal detainee classification system that starts at admission and is based on verifiable and documented information. Each detainee's custody classification must be determined through application of the ICE custody classification process described herein or a similar locally established system approved by ICE/ERO, to categorize detainees and physically separate them in accordance with those classification levels.

Some factors relevant to custody classification are part of the broader ICE intake risk assessment process that often begins before a detainee's arrival at a detention facility. Classification of ICE detainees also occurs in a variety of contexts and may be performed by a variety of personnel, including ICE or facility staff. The general principles articulated in this standard apply to all facilities that ICE uses. Facilities are also encouraged to utilize the ICE Custody Classification Worksheet, Instructions, Severity of Offense Scale, and Disciplinary Offenses Involving Violence or Behavior Representing a Threat to the Facility attached as Appendices 2.2.A, 2.2.B, 2.2.C, and 2.2.D. Facilities which receive a recommended custody classification or custody classification score generated by an ICE Field Office are encouraged to follow it.

"Classification" and "reclassification" are initial and periodic staff reviews, not only of a detainee's

custody classification, but of that detainee's general case status, disciplinary record, housing, special needs, adjustment to institutional living, opportunities for voluntary work assignments and general well-being.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard "7.5 Definitions."

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in "V. Expected Practices"):

1. The community, staff, contractors, volunteers and detainees shall be protected from harm through a formal classification process, for managing and separating detainees by threat risk and special vulnerabilities or special management concerns that is based on verifiable and documented data.
2. Each detainee shall be expeditiously classified upon admission to the facility and before being admitted into general population housing.
3. Detainees shall be protected from harm by assigning detainees housing with persons of similar backgrounds and criminal history.

4. Each detainee's custody classification, housing, and work assignment shall be reviewed at regular intervals, as well as when required by changes in the detainee's behavior or circumstances, and upon discovery of additional, relevant information.
5. Detainees shall be able to appeal their custody classification level and other assignments.
6. Detainees with special vulnerabilities will be identified and consideration will be given to providing appropriate accommodation.
7. Detainees shall be assigned to the least restrictive housing unit consistent with facility safety and security.
8. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

2.2 | Custody Classification System

This detention standard replaces "Classification System" dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-30, 2A-31, 2A-32, 2A-33, 2A-34.

ICE/ERO *Performance-based National Detention Standards 2011*:

- "2.11 Sexual Abuse and Assault Prevention and Intervention";
- "2.12 Special Management Units";
- "2.13 Staff-Detainee Communication";
- "5.8 Voluntary Work Program"; and
- "6.2 Grievance System."

"Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities," 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Standards

Each facility shall develop and implement a system for classifying detainees in accordance with this Detention Standard. Facilities may rely on the ICE Custody Classification Worksheet, or a similar locally established system, subject to ICE/ERO evaluation and approval, as long as the classification criteria are objective and uniformly applied, and all procedures meet ICE/ERO requirements.

Each facility administrator shall require that the facility's classification system ensures the following:

1. All detainees shall be classified upon arrival and before being admitted into the general population of the facility. ICE/ERO staff shall provide facilities the data needed from each detainee's file to complete the classification process;

2. All facility staff assigned to classification duties shall be adequately trained in the facility's classification process. Each staff member with detainee in-processing responsibilities shall receive on-site training;
3. Any detainee who cannot be classified because of missing information at the time of processing (e.g., the results of a criminal record check) shall be kept separate from the general population. Once the needed information is obtained, classification shall be expedited, and the detainee may be housed in the general population, if warranted;
4. Each detainee's classification shall be reviewed and approved by a first-line supervisor or classification supervisor; and
5. Detainees shall be assigned to housing, offered recreation and other activities, and assigned to voluntary work, according to their classification levels.

B. Custody Classification Score

"Classification" is a process of categorizing detainees as low, medium or high custody and housing them accordingly. Research has shown that discretionary decisions about custody classification are more objective and consistent when guided by a process that systematically uses verifiable and documented information, and scores those factors appropriately.

In making classification decisions, facilities use the recommended custody classification generated by the ICE Field Office, or utilize the ICE Custody Classification Worksheet (or similar system) to systematically produce a classification score for each detainee.

C. Classification Information

During the classification process, staff shall reference facts and other objective, credible evidence documented in the detainee's A-file, work-folders, ICE automated records systems, criminal history

checks, or other objective sources of information. Relevant considerations include any current criminal offense(s), past criminal offense(s), escape(s), institutional disciplinary history, documented violent episode(s) and/or incident(s), medical information or a history of victimization. Personal opinion, including opinions based on profiling, familiarity or personal experience, may not be considered in detainee classification.

Special consideration shall be given to any factor that would raise the risk of vulnerability, victimization or assault. Detainees who may be at risk of victimization or assault include, but are not limited to, persons with disabilities, persons who are transgender, elderly, pregnant, suffering from a serious medical or mental illness, and victims of torture, trafficking, abuse, or other crimes of violence. This process should incorporate the requirements in Standard 2.11 "Sexual Abuse and Assault Prevention and Intervention" regarding assessment of risk for victimization or perpetration of sexual abuse or assault.

Consistent with Standard 4.8 "Disability Identification, Assessment, and Accommodation," the facility shall use any information about identified disabilities in making classification and housing decisions. Detainees with disabilities shall be housed in the least restrictive and most integrated setting possible consistent with facility safety and security, and provided an equal opportunity to participate in or benefit from the facility's programs and activities.

When making classification and housing decisions for a transgender or intersex detainee, staff shall consider the detainee's gender self-identification and an assessment of the effects of placement on the detainee's health and safety. A medical or mental health professional shall be consulted as soon as practicable on this assessment. Placement decisions of transgender or intersex detainees should not be based solely on the identity documents or physical anatomy of the detainee, and a detainee's self-

identification of his/her gender and self-assessment of safety needs shall always be taken into consideration as well. The placement shall be consistent with the safety and security considerations of the facility, and placement and programming assignments for each transgender or intersex detainee shall be reassessed at least twice each year to review any threats to safety experienced by the detainee.

As appropriate, ICE/ERO offices shall provide non-ICE/ERO facilities with the relevant information for the facility to classify ICE/ ERO detainees.

Classification staff shall utilize translation services when necessary.

1. Examples of Acceptable Forms and Information

- I-862—Notice to Appear (charging document for aliens in removal proceedings);
- I-221—Order to Show Cause (OSC/WA) and Notice of Hearing, with bond conditions (charging documents for aliens in deportation proceedings);
- I-110 and I-122—Notice to Applicant for Admission, Detained for Hearing before Immigration Judge (charging documents for aliens in exclusion proceedings);
- Form I-203—Order to Detain or Release;
- All conviction documents relating to charges on Form I-221, I-862, and I-110/122 above;
- Criminal History (Rap Sheet)—NCIC/CII/TII, etc.;
- Final order of removal; and
- Any Executive Office for Immigration Review (EOIR) or other official record or observation that is verifiable.

2. Examples of Unacceptable Sources of Information that May Not Form the Sole Basis of Classification

- A written or oral account from any interested party, unless and until it has been officially confirmed;
- Unconfirmed and unverified information provided by the detainee; and
- The unverified personal opinion of officers and other personnel.

D. Intake Processing and Initial Classification

The facility shall segregate the detainee from the general population pending receipt and processing of information needed for classification, as specified above.

The initial classification process and initial housing assignment shall be completed within 12 hours of admission to the facility. If the process takes longer, documentation shall be maintained to explain the cause of the delay and to indicate that the detainee shall be housed appropriately.

After completion of the in-processing health screening form (IHSC-795A or equivalent), the classification officer assigned to intake processing shall review information provided by ICE/ERO and complete a custody classification worksheet or equivalent.

Upon completion of the classification process, at facilities where applicable, staff shall assign individual detainee's color-coded uniforms, wristbands, or other means of custody identification. A system of color-coding permits staff to identify a detainee's classification on sight, thereby eliminating confusion, preventing potentially serious miscommunication, and facilitating consistent treatment of detainees.

E. Supervisory Review and Custody Classification Assignment

The designated classification supervisor or facility administrator designee shall review the intake

processing officer's classification files for accuracy and completeness and ensure that each detainee is assigned to the appropriate housing unit.

The reviewing supervisor may recommend changes in classification due to:

1. Pertinent incidents of any kind (e.g., disciplinary, medical, victimizations, sexual assaults as either a victim or perpetrator, etc.) while in custody;
2. A classification appeal by a detainee or recognized representative (see below); or
3. Specific, creditable, documented and articulated facts that surface after the detainee's admissions processing.

F. Classification Levels and Housing Assignments

All facilities shall ensure that detainees are housed according to their classification levels. Participation in work assignments and available activities shall be determined to be consistent with safety and security considerations. Under no circumstances shall issues of facility management, or other factors external to the detainee classification system, influence a detainee's classification level.

SPCs, CDFs and dedicated IGSAs use either the recommended custody classification generated by the ICE Field Office or the point total from the ICE Custody Classification Worksheet to determine the classification level of each detainee.

Non-dedicated IGSAs are encouraged to use the ICE Custody Classification Worksheet, or to adopt the ICE custody classification score generated by an ICE Field Office when one is provided.

Non-dedicated IGSA that do not use the ICE Custody Classification Worksheet or rely on an ICE custody classification recommendation shall follow the guidelines below when classifying detainees.

1. Low Custody

Low custody detainees may not be comingled with

high custody detainees.

- May not include any detainee with an arrest or conviction that included an act of physical violence, or any detainee with a history of assaultive behavior.
- May not include any detainee with a felony conviction for an offense that is listed under the "High" or "Highest" section of the severity of offense guideline (Appendix 2.2.C).
- May include detainees with minor criminal histories and non-violent felony charges and convictions.

2. Medium Custody

Medium custody detainees may not ordinarily be comingled with high or low custody detainees, except as specified below in the section on "G. Housing Detainees with Different Classification Levels."

- May not include a detainee whose most recent conviction was for any offense listed under the "Highest" section of the severity of offense guideline (Appendix 2.2.C).
- May not include any detainee with a history or pattern of violent assaults.
- May not include a detainee convicted for assault on a correctional officer while in custody or where a previous institutional record suggests a pattern of assaults while in custody.

3. High Custody

- High custody detainees may be reclassified to medium only based on institutional behavior provided items under number 2 above do not apply. A detainee must be in custody for a minimum of 60 days before reclassification.
- High custody detainees shall not be assigned work duties outside their assigned living areas.
- High custody detainees:

- are considered high-risk,
- require medium- to maximum-security housing,
- are always monitored and escorted, and
- may not be co-mingled with low custody detainees.

The facility classification system shall assign detainees to the least restrictive housing unit consistent with facility safety and security. Grouping detainees with comparable histories together, and isolating those at each classification level from all others, reduces non-criminal and nonviolent detainees' exposure to physical and psychological danger. The system identifies and isolates the detainees whose histories indicate the characteristics of the "hardened criminal" and who are most likely to intimidate, threaten or prey on the vulnerable.

In facilities that have single cell living arrangements, detainees that pose an immediate and serious threat of violence to staff, other detainees, or themselves shall be housed there.

G. Housing Detainees with Different Classification Levels

Ordinarily, detainees in different custody classification levels are housed separately. When it becomes necessary to house detainees of different classification levels in the same housing unit, the following guidelines shall apply:

1. High custody detainees may not be housed with low custody detainees.
2. Low custody detainees and medium-low custody detainees may be housed together, and medium-high custody detainees and high custody detainees may be housed together:
3. Medium-low custody detainees are those with no history of violent or assaultive charges or convictions, no institutional misconduct, and no gang affiliation.

4. Medium-high and high custody detainees are those with a history of violent or assaultive charges, convictions, institutional misconduct, or those with a gang affiliation
5. Under no circumstance may a medium custody detainee with a history of assaultive or combative behavior be placed in a low custody housing unit.

ICE may provide to facilities specific recommendations or scores based on the ICE custody classification system to further guide facility housing assignments.

H. Reclassification

All facility classification systems shall ensure that a detainee is reassessed and/or reclassified.

Reclassification assessments shall take into account, among other factors, the detainee's risk of victimization or abusiveness.

Staff shall record whether a classification process is being conducted for an initial classification or subsequent reclassification:

1. The first reclassification assessment shall be completed 60 to 90 days after the date of the initial classification.
2. Subsequent reclassification assessments shall be completed at 90- to 120-day intervals.
3. Special Reclassification Assessments
Staff shall complete a special reclassification within 24 hours before a detainee leaves the Special Management Unit (SMU), following an incident of abuse or victimization, and at any other time when warranted based upon the receipt of additional, relevant information, such as after a criminal act, or if a detainee wins a criminal appeal, is pardoned or new criminal information comes to light.

If it is documented, suspected or reported that a detainee has been physically or sexually abused or assaulted, the victim's perception of his or her own safety and well-being shall be among the

factors considered.

A detainee may request reclassification in writing by submitting a detainee request form, as described in standard “2.13 Staff-Detainee Communication.” The classification officer shall ordinarily respond in person or in writing as soon as possible and practicable, but no later than within 72 hours of receipt. Any reclassification, however, requires prior supervisory approval on the custody classification form.

4. Permissible Changes

- A detainee may be reclassified at any time to correct classification errors or when new information becomes available.
- A detainee may be reclassified to high custody based on documented behavior, including threats to the facility, other detainees or personnel. Any reclassification to high custody that is not validated by the total custody classification score on the custody classification form must be approved by the classification officer within 72 hours of any event requiring reclassification.
- A medium custody detainee may be reclassified to low custody based on institutional behavior, provided the detainee has been in custody for at least 60 days.

- A detainee may be reclassified any time there are medically documented changes in his/her medical or mental health condition.

I. Classification Appeal

Classification decisions should be provided to the detainee along with information on the appeal process in a language and manner understood by the detainee.

Classification systems shall include procedures for detainees to appeal their classification levels through written detainee request forms or by filing formal grievances as described in standard “6.2 Grievance System.”

J. Documentation

Classification forms and supporting documentation shall be placed in the detention file.

K. Notice to Detainees

The *ICE Detainee Handbook* standard section on classification shall include:

- An explanation of the classification levels, with the conditions and restrictions applicable to each.
- The procedures by which a detainee may appeal his or her classification.

Appendix 2.2.A: ICE Custody Classification Worksheet

ICE Custody Classification Worksheet

Part 1. Basic Information		Initial	Reclassification	Special Classification
Field/Sub Office:		Facility:	Date:	
Officer Name:		Language(s) Used during the Interview:		

Alien Number:		DOB:		Gender:	<input type="checkbox"/> F <input type="checkbox"/> M
Last Name:			First Name:		

Part 2. Special Vulnerabilities and Management Concerns	
	<p>Does a Special Vulnerability exist? Inquire, observe, and review all documentation. If based on your assessment the vulnerability exists, select the appropriate boxes below. Also indicate whether there are other management concerns that may affect the custody decision.</p> <p><input type="checkbox"/> Y <input type="checkbox"/> N</p>
	<p> <input type="checkbox"/> serious physical illness <input type="checkbox"/> serious mental illness <input type="checkbox"/> disability <input type="checkbox"/> elderly <input type="checkbox"/> pregnancy <input type="checkbox"/> nursing <input type="checkbox"/> sole caretaking responsibility <input type="checkbox"/> risk based on sexual orientation/gender identity <input type="checkbox"/> victim of persecution/torture <input type="checkbox"/> victim of sexual abuse or violent crime <input type="checkbox"/> victim of human trafficking <input type="checkbox"/> other (specify): </p>
	Provide further explanation as necessary:
	<i>If any boxes are checked, consult with the local ICE Field Office regarding appropriate placement and other management considerations, and record the date and time of consultation here:</i>

Part 3. Custody Classification Worksheet

1	Severity of Charge/ Conviction Associated with the ICE Encounter (Use Appendix 2.2.C Severity of Offense Scale)							
	None		0	Enter the score here: _____				
	Low		2					
	Moderate		4					
	High		6					
	Highest		7					
2	Single Most Serious Conviction in the Individual's Criminal History (Excluding Item 1)							
	See Appendix 2.2.C		None	>15 Years	10-15 Years	5-10 Years	< 5 Years	Enter the score here: _____
		Highest	0	5	5	6	7	
		High	0	5	5	6	6	
		Moderate	0	1	2	3	4	
		Low	0	0	0	1	2	
3	Additional Prior Convictions (Excluding Items 1 and 2)							
	None		0	Enter the score here: _____				
	1-2 misdemeanors, no felonies		1					
	3-4 misdemeanors, or 1 felony		2					
	5 or more misdemeanors, or 2 felonies		4					
4	Supervision History							
	None		0	Enter the score here: _____				
	Walk-away or attempted escape from an unsecured facility, absconding, bond breach, violations of prior voluntary departure orders or conditions of supervision, or prior revocation of supervision		3					
	Escape or attempted escape from a secure facility		7					
5	Security Threat Group (STG)							
	The individual has no known membership or affiliation with an STG		0	Enter the score here: _____				
	The individual is a member of an STG		5					
6	History/Pattern of Violence (Two or more arrests)							
	15 or more years ago		1	Enter the score here: _____				
	Over 10 years and less than 15 years ago		2					
	Over 5 years and less than 10 years ago		3					
	Within the last 5 years		5					
7	Number of Sustained Disciplinary Infractions Involving Violence or Behavior Representing a Threat to the Facility (Institution(s)):							
	None		0	Enter the score here: _____				
	One		2					
	Two		4					
	Three or more		6					
	Check if data not available:		<input type="checkbox"/>					
Total Custody Classification Score _____								

Custody Level Guideline Ranges					
If there is no arrest or conviction for a violent offense, use this table.				If the person has an arrest or conviction for a violent offense, use this table.	
Low Custody	0-2				
Medium-Low Custody	3-5				
Medium-High Custody	6-11				
High Custody	12+			0-6	7+
If the Officer makes a custody recommendation outside of the custody level guideline ranges above, provide the rationale and include aggravating/ mitigating circumstances that were considered in the decision:					
Recommendation Outside the Guideline Ranges		Low	Medium-Low	Medium-High	High
Officer Signature				Date	
<p>In the section below, check the custody level of the individual's housing assignment, following the guidance provided in the instructions, F. Housing Assignment.</p> <p>For purposes of housing medium-custody individuals with low-or high level custody individuals, use the following guidelines:</p> <p>Medium-Low may be housed with low custody individuals;</p> <p>Medium-High may be housed with high-custody individuals; but,</p> <p>Low custody individuals may never be housed with high-custody individuals, or medium custody individuals who have any history of assaultive or combative behavior.</p> <p>If the individual is to be placed in administrative segregation, a copy of the administrative segregation order shall be immediately provided to the Field Office Director or his designee, as required by Standard 2.12 "Special Management Units."</p>					
Final Housing Assignment Custody Level		Low	Medium-Low	Medium-High	High Administrative
If the Supervisor decides to override the Officer's custody level recommendation, provide the rationale below:					
Supervisor Signature				Date	

Appendix 2.2.B: Instructions for Completing the ICE Custody Classification Worksheet

1. Introduction

Each facility is required to have a formal detainee classification system that starts at admission and is based on verifiable and documented information.

“Classification” and “reclassification” are initial and periodic staff reviews, not only of a detainee’s custody classification, but of that detainee’s general case status, disciplinary record, housing, special needs, adjustment to institutional living, opportunities for voluntary work assignments, and general well-being.

Custody classification is a process of categorizing detainees as low, medium or high custody and housing them accordingly. The ICE Custody Classification Worksheet, attached as Appendix 2.2.A, is designed to systematically document and score information about each detainee in order to produce a total custody classification score that may be used, in conjunction with professional experience and judgment, to guide classification decisions.

The factors considered for custody classification closely align with the “public safety factors” that are part of the broader ICE intake risk assessment and classification process that often begins even before a detainee’s arrival at a detention facility.

While the protection of detainees, staff, contractors, volunteers and the community from harm is an important consideration in determining a detainee’s custody classification, a decision about where and how to house a detainee is also based on the detainee’s physical and mental health and other important factors relating to a detainee’s special needs, which are referred to as “special vulnerabilities” or “management concerns.”

2. Specific Instructions for Completing the

ICE Custody Classification Worksheet

A. Basic Information – Part 1

Check the appropriate box to indicate whether the form is being completed for:

- Initial classification
- Reclassification. (The first reclassification assessment should be completed 60 to 90 days after the initial classification. Subsequent reclassification assessments should be completed at 90 to 120-day intervals.)
- Special reclassification (see standard “2.2 Custody Classification System”).

Enter the Field/Sub Office, facility and date.

Enter the name of the classification officer and the language(s) used during the interview.

Enter the detainee’s alien number, last name, first name, date of birth, and gender.

B. Special Vulnerabilities and Management Concerns – Part 2

Special vulnerabilities and management concerns should be taken into account in assigning levels of detention custody.

The classification officer should inquire about and remain alert to signs of any special vulnerability or management concern that may affect the custody determination. Special vulnerabilities may include disability, serious medical or mental health needs, risk based on sexual orientation or gender identity, advanced age, pregnancy, nursing, sole caretaking responsibilities, or victimization, including individuals who may be eligible for relief related to the Violence Against Women Act (VAWA), victims of crime (U visa), or victims of human trafficking (T visa). (To detain individuals confirmed to have vulnerabilities, ICE Officers must prior to the individual’s arrival at the facility have obtained concurrence from the Field Office Director (FOD)

and sent a significant event notice (SEN) to Headquarters.)

Use the boxes provided to check any vulnerability that applies, and provide an explanation if necessary. If any boxes are checked, consult with the local ICE Field Office regarding appropriate placement and other management considerations.

C. Custody Classification Scoring – Part 3

Item 1—Severity of Charge/Conviction Associated with the ICE Encounter.

Determine the charge or conviction, if any, that is associated with the individual's current ICE encounter, and locate it or a similar offense in "Appendix 2.2.C: Severity of Offense Scale" to determine if it is in the "Low," "Moderate," "High," or "Highest" category. If more than one charge or conviction is involved, choose only the most serious charge/conviction that led to the encounter by consulting the Severity of Offense Scale.

Identify the score associated with the severity category into which the individual's most serious offense falls.

Enter the score in the field provided.

If the individual was last booked and returned to custody for a parole or probation violation, the severity of the current charge/conviction should be based on the offense(s) for which parole or probation was granted.

Item 2—Single Most Serious Conviction in the Individual's Criminal History.

Excluding the entry in Item 1, determine the individual's most serious prior conviction under "Appendix 2.2.C: Severity of Offense Scale" to determine if it or a similar offense is in the "Low," "Moderate," "High," or "Highest" category.

Separate convictions for multiple crimes should be considered independently of each other, regardless of whether they occurred on the same date.

Based on how long ago this conviction occurred, use the table located on the ICE Custody Classification Worksheet to assign a score. For example, if an individual was convicted of burglary with an assault, this would be a "Highest" offense and the row labeled "Highest" on the ICE Custody Classification Worksheet would be used. If the individual was convicted of this offense less than 5 years from the date this form is being completed, then the individual would receive a score of 7.

If the individual's most serious conviction is trespass, this would be a "Low" offense according to "Appendix 2.2.C" and the row labeled "Low" on the ICE Custody Classification Worksheet would be used. If the individual was convicted of this offense within 10-15 years of the date this form is being filled out, then the individual would receive a score of 0.

If the individual has no record of prior convictions, enter 0.

Enter the score in the field provided.

Item 3—Additional Prior Convictions Excluding Items 1 and 2.

Use the ICE Custody Classification Worksheet to score all other misdemeanor and felony convictions that have not been scored in Items 1 and 2 (including all separate convictions obtained for multiple crimes, regardless of whether they occurred on the same date).

Select the highest score applicable to the individual's history of additional prior convictions. For instance, if the individual has been convicted of 2 misdemeanors and 1 felony, a score of 2 (and not 1) should be assigned.

Item 4—Supervision History.

Escapes from correctional settings or programs should be counted if the individual was found guilty of the escape or escape attempt by an institutional disciplinary committee, regardless of court prosecution or conviction status. Do not consider any escapes or attempts scored in Item 1.

With regard to “violations of prior voluntary departure orders,” an individual should be scored 3 points only if he/she has *repeated* failures to appear for his/her immigration hearings. Do not include a single failure to appear for an immigration hearing.

Enter the score corresponding to the individual’s most serious escape attempt in the field provided.

Item 5—Security Threat Group.

Security Threat Group (STG)

A Security Threat Group (STG) member is any individual, who through association, ideology, self-identification, identifying symbol(s), or activities and/or conduct (both inside and outside custodial environments), is known to pose a threat to the safety of the community, the security of ICE staff, ICE facilities, and/or those in ICE custody.

Security Threat Group (STG) Examples

- Traditional Prison Gangs
- Traditional Street Gangs
- Non-Traditional Gangs
- Transnational Criminal Organizations
- Foreign and Domestic Terrorist Organizations
- Special Groups

Enter 0 if there is no known affiliation or membership.

Enter 5 if there is documentation or a self-admission that the individual is a member of an STG.

Item 6 – History/Pattern of Violence

If the individual has two or more prior arrests for violence against the person, use Item 6 to score those arrests. The less recent the occurrence of the arrests, the lower the score. Use the most recent arrest to calibrate the time period. If the more recent of the two arrests for a violent offense occurred within the last 5 years, score this item as a 5. If the more recent of the two arrests occurred over 5 years ago, and less

than 10 years ago, score the item as a 3. If the more recent of the two arrests occurred more than 10 years ago, and less than 15 years ago, score this item as a 2. If the arrest occurred more than 15 years ago, score this item as a 0.

Item 7—Number of Sustained Institutional Disciplinary Infractions

Sustained disciplinary infractions should be counted if they involved violence or behavior representing a threat to the facility. Using records from a current period of ICE detention and/or prior periods of detention or imprisonment, calculate and enter the appropriate number of points. As a general matter disciplinary offenses that involve violence or behavior representing a threat to the facility are those listed in the “Greatest” and “High” offense categories in standard “3.1 Disciplinary System”, Appendix 3.1.A. These offenses are also listed in Appendix 2.2.D. If no information is available, check the box and score Item 7 as 0.

D. Total Custody Classification Score

Add the points in Items 1 through 7 to calculate the detainee’s total custody classification score.

E. Classification Officer’s Recommended Custody Level

In the area designated “Custody Level Guideline Ranges,” check the box that corresponds to the value entered for the total custody classification score. If the detainee has no violent conviction, use the following scoring ranges. If the total score is 0-2, check the Low Custody box. If the total score is 3-5, check the Medium-Low Custody box. If the total score is 6-11, check the Medium-High Custody box. If the total score is 12 or more, check the High Custody Box. If the detainee has a violent conviction, use the following scoring ranges. If the detainee’s total score is 0-6, check the Medium-High Custody box. If the total score is 7 or more, check the High Custody box.

If a decision is made to recommend a custody level

that falls outside of the ranges prescribed by the worksheet, note in the space provided the aggravating/mitigating or other circumstances that justify that decision. The space should also be used for any other matters the classification officer would like to document or call to the attention of the supervisor with regard to the detainee's custody classification and housing.

In the area designated "Recommendation Outside the Guideline Ranges," check the custody level box that corresponds to the custody level recommendation made that differs from that prescribed by the Custody Level Guideline Ranges.

F. Housing Assignment

In the area designated "Final Housing Assignment Custody Level," check the level of custody of the individual's housing assignment.

If the detainee is to be placed in administrative segregation, a copy of the administrative segregation order shall be immediately provided to the Field Office Director or his designee, as required by

Standard 2.12 "Special Management Units."

For purposes of housing medium-custody individuals with low or high level custody individuals, use the following guidelines:

Medium-Low may be housed with low custody individuals;

Medium-High may be housed with high-custody individuals; but,

Low custody individuals may never be housed with high-custody individuals, or medium custody individuals who have any history of assaultive or combative behavior.

ICE may periodically provide additional recommendations and guidance.

G. Supervisory Approval

In the area designated "Supervisor Signature," the supervisor should sign and date the ICE Custody Classification worksheet indicating his/her approval of the decisions recorded in this worksheet.

Appendix 2.2.C: Severity of Offense Scale

I. HIGHEST

Aiding Escape
Aggravated
Battery with Deadly Weapon
Armed Robbery (Multiple with injury)
Burglary with Assault
Escape (Secure Facility)
Inciting Riot
Kidnapping
Murder (1st, 2nd degree)
Sexual Battery (with violence upon a minor)

II. HIGH

Aggravated Assault
Aggravated Battery
Aggravated Child Abuse
Arson
Battery Law Enforcement Officer
Burglary (Armed)
Extortion
False Imprisonment
False Report of Bombings
Controlled Substances (Importation, Trafficking)
Introduction of Contraband into Detention Facility
Manufacture of Explosives
Robbery (armed, strong armed)
Sexual Battery (other than capital or life felony)

III. MODERATE

Armed Trespass
Burglary
Carrying Concealed Firearm
Forgery
Grand Theft
Manslaughter
Sale, Delivery, Possession of Controlled Substance
Tampering with Witness
Worthless Checks (felony)
Welfare Fraud (felony)
Escape (Non-secure Facility)

IV. LOW

Driving under the Influence
Leaving the scene of Accident
Battery (Simple Assault)
Carrying Concealed Weapon (other than firearm)
Disorderly Conduct
Gambling
Offering to Commit Prostitution
Possession Marijuana (misdemeanor)
Possession Drug Paraphernalia
Petit Theft
Trespass
Worthless Check (misdemeanor)

Appendix 2.2.D: Disciplinary Offenses Involving Violence or Behavior Representing a Threat to the Facility

I. “Greatest” Offense Category

- 100 Killing
- 101 Assaulting any person (includes sexual assault)
- 102 Escape from escort; escape from a secure facility
- 103 Setting a fire (charged with this act in this category only when found to pose a threat to life or a threat of serious bodily harm or in furtherance of a prohibited act of greatest severity [e.g., a riot or an escape]; otherwise the charge is classified as Code 218 or 321)
- 104 Possession or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous chemical, explosive, escape tool, device or ammunition
- 105 Rioting
- 106 Inciting others to riot
- 107 Hostage-taking
- 108 Assaulting a staff member or any law enforcement officer
- 109 Threatening a staff member or any law enforcement office with bodily harm
- *198 Interfering with a staff member in the performance of duties (conduct must be of the greatest severity; this charge is to be used only if another charge of greatest severity is not applicable)
- *199 Conduct that disrupts or interferes with the security or orderly running of the facility (conduct must be of the greatest severity;

this charge is to be used only if another charge of greatest severity is not applicable)

II. “High” Offense Category

- 200 Escape from unescorted activities open or secure facility, proceeding without violence
- 201 Fighting, boxing, wrestling, sparring and any other form of physical encounter, including horseplay, that causes or could cause injury to another person, except when part of an approved recreational or athletic activity
- 202 Possession or introduction of an unauthorized tool
- 203 Loss, misplacement or damage of any restricted tool
- 204 Threatening another with bodily harm
- 205 Extortion, blackmail, protection and demanding or receiving money or anything of value in return for protection against others, avoiding bodily harm or avoiding a threat of being informed against
- 206 Engaging in sexual acts
- 207 Making sexual proposals or threats
- 208 Wearing a disguise or mask
- 209 Tampering with or blocking any lock device
- 210 Adulterating of food or drink
- 211 Possessing, introducing, or using narcotics, narcotic paraphernalia or drugs not prescribed for the individual by the medical staff
- 212 Possessing an officer’s or staff member’s clothing
- 213 Engaging in or inciting a group demonstration
- 214 Encouraging others to participate in a work stoppage or to refuse to work

215	Refusing to provide a urine sample or otherwise cooperate in a drug test	moderate offenses within 90 days
216	Introducing alcohol into the facility	222 Possessing or introducing an incendiary device (e.g., matches, lighter, etc.)
217	Giving or offering an official or staff member a bribe or anything of value	223 Engaging in any act that could endanger person(s) and/or property
218	Giving money to, or receiving money from, any person for an illegal or prohibited purpose (e.g., introducing/conveying contraband)	*298 Interfering with a staff member in the performance of duties (conduct must be of highest severity; this charge is to be used only when no other charge of highest severity is applicable)
219	Destroying, altering, or damaging property (government or another person's) worth more than \$100	*299 Conduct that disrupts or interferes with the security or orderly operation of the facility (conduct must be of highest severity; this charge is to be used only when no other charge of highest severity is applicable)
220	Being found guilty of any combination of three or more high moderate or low	

2.3 Contraband

I. Purpose and Scope

This detention standard protects detainees and staff while enhancing facility security and good order by identifying, detecting, controlling and properly disposing of contraband.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”):

1. Contraband shall be identified, detected, controlled and disposed of properly.
2. Detainee personal property that would be considered contraband within the facility shall be mailed to a third party or stored until the detainee’s release, unless that property is illegal to possess or constitutes a threat to safety or security.
3. Contraband that may be evidence in connection with a violation of a criminal statute shall be

preserved, inventoried, controlled and stored with a documented chain of custody.

4. Any facility-approved auxiliary aids, services, or items used by a detainee with a disability shall not be considered contraband.
5. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces the standard on “Contraband” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 2C-01, 2C-02, 2C-06.

ICE/ERO *Performance-based National Detention*

Standards 2011:

- “2.5 Funds and Personal Property”; and
- “6.2 Grievance System.”

V. Expected Practices

A. “Hard” and “Soft” Contraband

Contraband is anything detainees are not authorized to have in their possession.

1. A detainee found in possession of hard contraband could face disciplinary action or criminal prosecution.

Hard contraband includes, but is not limited to, any item that:

- a. is inherently dangerous;
- b. is a tool or device that could be used to escape; or
- c. may otherwise interfere with security, safety, or the good order of facility operations.

Examples of hard contraband include:

- a. tools that could aid in an escape (e.g., ropes, keys);
- b. ammunition or explosives;
- c. combustible or flammable liquids;
- d. hazardous or poisonous chemicals and gases;
- e. weapons;
- f. intoxicants;
- g. currency (where prohibited); and
- h. narcotics and other controlled substances not dispensed or approved by the medical department, not used as prescribed, or in the possession of a detainee other than the person for whom it was prescribed.

Staff shall consult the facility pharmacist or other health services staff members when

uncertain about whether a prescribed medication represents contraband.

Medicine the detainee brings into the facility upon arrival shall be forwarded to the facility medical staff for disposition as specified under standard “4.3 Medical Care.” Only replacement medication duly approved by the facility medical staff shall be returned to the detainee.

2. Soft contraband includes, but is not limited to, “nuisance” items that do not pose a direct and immediate threat to safety or security, but which have the potential to create dangerous or unsanitary conditions in the facility (e.g., excess papers that create a fire hazard; food items that are spoiled or retained beyond the point of safe consumption).

If excessive authorized legal materials create a fire hazard, the facility shall provide an alternate storage area accessible to the detainee.

B. Procedures for Handling Contraband

All facilities shall have written policies and procedures for handling contraband, including the seizure of contraband, disputed ownership, detainee or government property defined as contraband, and the preservation, inventory, and storage of contraband as evidence of a crime. Facilities shall ordinarily consult a religious authority before confiscating a religious item deemed “soft” contraband.

Any facility-approved auxiliary aids, services, or items used by a detainee with a disability shall not be considered contraband.

1. Seizure of Contraband

Staff shall seize contraband:

- a. *Found in the physical possession or living area of a detainee (including a detainee awaiting voluntary return);*
- b. *Found in common areas;*

- c. *Found in incoming or outgoing mail;*
- d. *Discovered during admission in-processing; and,*
- e. *Found in transport vehicles.*

Exceptions may occur only upon written authorization of the facility administrator.

2. Religious Items

The facility administrator shall ordinarily consult a religious authority before confiscating a religious item that is deemed “soft” contraband (see also standard “5.5 Religious Practices”).

3. Disputed Ownership

When a detainee’s claimed ownership of potential contraband material is in question, staff shall:

- a. *inventory and store the items pending verification of ownership; and*
- b. *provide the detainee with a copy of the inventory as soon as practicable, and place a second copy in the detainee’s detention file. The detainee shall have seven days following receipt of the inventory to prove ownership of the listed items.*

Staff shall deny claims:

- a. *arising from the unauthorized use of government property; and*
- b. *for any item acquired, without authorization, from another detainee.*

4. Detainee Property Defined as Contraband

Staff shall seize all hard and soft contraband. In the event that the contraband is not illegal to possess under criminal statutes and would not otherwise pose a threat to security, staff shall inventory and provide a receipt for the property. At the detainee’s request, the staff will mail the property to a third party, or store it with the detainee’s other stored personal property, in accordance with standard “2.5 Funds and Personal Property.” If a detainee chooses not to provide an appropriate mailing address within 30 days, or is unable to pay the postage, the facility

administrator after ICE/ERO concurrence, and after providing the detainee with written notice of the intent to destroy the property along with information on how to retain the property in question, may dispose of the property in accordance with the section on “Destruction of Contraband” below in this standard. If a detainee cannot establish ownership, staff shall attempt to resolve the matter. If ownership cannot be reasonably established, the property may be destroyed, as also described below in this standard.

5. Evidence of a Crime

Contraband that is illegal to possess or may be evidence in connection with a violation of a criminal statute shall be preserved, inventoried, controlled and stored with a documented chain of custody, and shall be reported to the appropriate law enforcement authority for action and possible seizure, destruction or disposition of contraband is detailed under standard “2.5 Funds and Personal Property.”

6. Government Property

Contraband which is government property shall be retained as evidence for possible disciplinary action or criminal prosecution, after which, as appropriate, it may be:

- a. *returned to the issuing authority;*
- b. *returned to normal stock for reissue; or*
- c. *destroyed, with the approval of the facility administrator.*

C. Destruction of Contraband

The facility administrator shall establish a procedure for the destruction of contraband items.

Contraband may be destroyed when no longer needed for disciplinary action or criminal prosecution. It may also be kept for official use, such as use as a training tool, if secured in the facility armory when not in use.

- 1. *The Chief of Security, or equivalent, shall*

determine whether an item shall be destroyed.

- 2. The Chief of Security shall send the facility administrator a memorandum, through official channels, describing what is to be destroyed and the rationale for destruction.*
- 3. The facility administrator shall require that an item of questionable ownership be held for 120 days before its destruction can be considered, to afford the detainee ample opportunity to obtain proof of ownership and appeal the decision in accordance with standard “6.2 Grievance System.”*

Where disciplinary action is appropriate, the facility administrator shall defer his/her decision about the property until the disciplinary case, including any appeals, is resolved.
- 4. The officer who physically destroys the property and at least one official observer shall attest, in writing, to having witnessed the property’s destruction.*
- 5. A copy of the property disposal record shall be given to the detainee, and another copy shall be*

placed in the detainee’s detention file.

D. Canine Units

Canine units (in facilities that have them) may be used for contraband detection, but their use for force, control, or intimidation of detainees is prohibited, in accordance with standard “2.15 Use of Force and Restraints.”

Any facility that has a canine unit shall establish a clear and detailed written policy and procedures governing the circumstances in which canine units may be used, in regard to ICE/ ERO detainees.

Canines shall not be used in the presence of ICE detainees.

E. Notice to Detainees

The detainee handbook, or equivalent, shall notify detainees in a language or manner that they understand relative to:

1. The facility’s rules and procedures governing contraband; and
2. The applicability of standard “2.5 Funds and Personal Property,” as it relates to contraband.

2.4 Facility Security and Control

I. Purpose and Scope

This detention standard protects the community, staff, contractors, volunteers and detainees from harm by ensuring that facility security is maintained and events which pose risk of harm are prevented.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”):

1. The facility administrator shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually.
2. Essential security posts and positions will be staffed with qualified personnel.

3. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.
4. The facility’s perimeter will ensure that detainees remain within and that public access is denied without proper authorization.
5. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.
6. Facility safety, security and good order, including the safety, health and well-being of staff and detainees, will be enhanced through ongoing observation, supervision, and personal contact and interaction between staff and detainees.
7. Special security and control measures will consistently be applied to Special Management Unit entrances.
8. Facility safety, security and good order will be enhanced through frequent and documented staff inspections of detainee-occupied and unoccupied areas.
9. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

III. Standards Affected

This detention standard replaces “Facility Security and Control” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-01 through 2A-14, 2A-18, 2C-01, 2C-02, 7F-06

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.3 Contraband”;
- “2.5 Funds and Personal Property”;
- “2.7 Key and Lock Control”;
- “2.8 Population Counts”;
- “2.9 Post Orders”;
- “2.12 Special Management Units”;
- “2.15 Use of Force and Restraints”;
- “2.14 Tool Control”;
- “5.1 Correspondence and Other Mail”;
- “5.7 Visitation”; and
- “6.2 Grievance System.”

“Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Detainee Supervision and Monitoring

Each facility shall ensure that it maintains sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, video monitoring, to protect detainees against sexual abuse assault, other forms of violence or harassment, and to prevent significant self-harm and suicide. Security staffing shall be sufficient to maintain facility security and prevent or minimize events that pose a risk of harm to persons and property.

The facility administrator shall develop and document comprehensive detainee supervision guidelines, as well as a comprehensive staffing analysis and staffing plan, to determine and meet the facility’s detainee supervision needs; these shall be reviewed and updated at least annually. Essential posts and positions shall be filled with qualified personnel.

In determining adequate levels of detainee supervision and determining the need for video monitoring, the facility administrator shall take into consideration generally accepted detention and correctional practices, any judicial findings of inadequacy, the physical layout of each facility, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse as well as other incidents reflecting on facility security and detainee safety, the findings and recommendations of sexual abuse incident review reports or other findings reflecting on facility security and detainee safety, the length of time detainees spend in agency custody, and any other relevant factors.

At least one male and one female staff member shall be on duty at all times in a facility housing both male and female detainees.

All security posts shall be guided by standard “2.9 Post Orders.”

B. Control Centers

Each facility shall have a secure control center that is staffed continuously, 24/7. Control center staff shall monitor and coordinate facility security, life-safety and communication systems.

The Chief of Security shall carefully screen officers for the highly responsible control center post assignment(s). The Control officer’s responsibilities include (but are not limited to) key control, count procedures and public-address-system operations. The standards on “Key and Lock Control” and “Population Counts” detail requirements for key

control and counts.

The facility administrator shall establish procedures to implement the following control center requirements:

1. round-the-clock staffing;
2. limited staff access;
3. no detainee access (in a control center, staff must perform cleaning duties that elsewhere in the facility may ordinarily be assigned to detainees);
4. round-the-clock communications;
5. maintenance of a list of the current home and cell phone numbers of every staff member assigned to the facility, including administrative/support services staff members, all situation response team members (SRTs), hostage negotiation team member (HNTs) and applicable law enforcement agencies. If any staff member is inaccessible by phone, other means of off-duty contact approved by the facility administrator, such as a pager number or e-mail address, may be listed; the list shall:
 - a. be on file in both the control center and the shift supervisor's office;
 - b. be maintained in a secure file;
 - c. be used for emergency recall or urgent business only;
 - d. be updated at least quarterly; and
 - e. prominently feature the following notice:

"This information must be safeguarded. Use is restricted to those who need the information in the performance of their official duties. Misuse shall subject the user to criminal liability. This agency shall view any misuse of this information as a serious violation of the Employee Code of Conduct, which may result in disciplinary action, including removal."
6. round-the-clock accountability for equipment; and

7. a watch call system (officer safety checks) to the control center by all staff, ordinarily to occur every half-hour between 6:00 P.M. and 6:00 A.M. Individual facility policy may designate another post to conduct watch calls. Any exception to exempt staff from making watch calls as described in this standard requires the approval of the facility administrator.

C. Perimeter Security

1. Front Entrance

The facility's front entrance shall be a controlled access point. Entrance into the secure perimeter shall be controlled by a sally port (or equivalent with electronic interlocking doors or grilles) to prevent unauthorized entry or exit.

Staff assigned to the front entrance post shall be selected and expected to present a neat and professional appearance, exercise public relations skills of courtesy and tact, and interact and communicate easily and effectively with diverse people. Front entrance staff is expected to uphold these responsibilities while also maintaining security and enforcing regulations.

a. Identification and Searches

The officer assigned to this post shall check the identification documents of every visitor, employee and other person entering or leaving the facility. No adult visitor may be admitted without government-issued photo identification.

b. Record

- 1) The post officer shall maintain the visitor logbook, a bound ledger in which all non-staff visits are to be recorded.
- 2) Every entry in the logbook shall identify the person or department visited, date and time of the visitor's arrival, purpose of visit, unusual requests and time of departure.
- 3) The entry for a person visiting a detainee shall also include the name and A-number of the

detainee being visited, and the address and relationship to the detainee. The post officer shall require the visitor to print and sign his/her name in the visitor logbook.

- 4) *All ICE/ERO employees shall wear ICE/ERO-issued identification cards (to include photograph and name). The facility shall maintain a tracking mechanism for all staff permanently stationed at the facility. This mechanism shall include a process to rapidly verify all staff entering and leaving the perimeter.*
- 5) *The facility administrator shall establish procedures for tracking the arrivals and departures of contract employees. However, the main gate/front entrance officer shall maintain a separate file of contract employee Forms G-74, or equivalent, laminated, with photograph, issue date, expiration date (if applicable), and the facility administrator's signature.*

c. Visitor Passes

The facility administrator shall establish procedures for issuing color-coded visitor passes to all visitors entering the facility via the main gate/front entrance. Visitors must prominently display this pass on an outer garment, where it is visible (at a glance) to staff.

The post officer shall check the validity of the identification. In exchange for the photo-identification card (e.g., driver's license, student ID card), the post officer shall issue the visitor a color-coded pass, provided the photo resembles the visitor closely enough to identify the visitor. The visitor must leave his/her photo-identification card with the post officer until the end of the visit, marked by the time-out entry in the logbook.

The post officer shall hold all visitor identification cards at the main gate front entrance, for the

following security reasons:

- 1) *to account for visitors in the event of an emergency (e.g., medical, fire, hostage situation, or other incident);*
 - 2) *as a check on logbook data; and*
 - 3) *as a disincentive for criminal or disruptive behavior (e.g., distributing drugs or other contraband; inciting an internal disturbance or riot, etc.).*
- d. *Blue Visitor Passes (or color-coded equivalent) ICE/ERO employees not permanently stationed at the facility, and official visitors from other Department of Homeland Security agencies, shall receive "blue" passes. Visitors with blue passes do not need, but may request, escorts.*

The post officer shall record every official visitor's arrivals and departures in the visitor logbook, including the person or department visited, date and time of visitor's arrival, purpose of visit, unusual requests and time of departure.

To save time, all ICE/ERO employees with frequent business at the facility but stationed elsewhere shall complete a G-74 form, or equivalent, for the front-entrance personal data card file.

- e. *Yellow Visitor Passes (or color-coded equivalent) Law enforcement officers not directly connected with ICE/ERO, vendors and other persons visiting in an official capacity shall receive "yellow" passes. Their visits shall be recorded in the visitor logbook. Escorts are required for visitors with yellow passes.*
- f. *Orange Visitor Passes (or color-coded equivalent) "Orange" passes shall be distributed to contractual construction service personnel, including:*
- 1) *representatives of the Army Corps of Engineers, and*
 - 2) *contractors, including sub-contractors, employees, laborers, supervisors, etc.*

Each facility administrator shall require such persons to identify themselves, consistent with the photo-ID requirements stated above in the standard, and shall devise procedures for issuing construction visitor passes, including requirements for each visitor to display his/her pass. Procedures will also provide for a listing of facility areas where construction visitors are authorized to be present and to work. Visitors with orange visitor passes must be escorted.

- g. *Red Visitor Passes (or color-code equivalent)*
Non-official persons visiting detainees or visiting the facility, regardless of affiliation, shall receive “red” passes. The post officer shall enter their visits in the visitor logbook as specified under the “Record” section of this standard. Escorts are required for visitors with red passes.

If a visitor leaves the facility without surrendering the visitor pass and retrieving his/her identification card, the post officer shall photocopy the identification card and attach it to a memo to the shift supervisor stating the:

- 1) visitor’s name;*
- 2) visitor’s title (if applicable);*
- 3) person or department visited;*
- 4) time the pass was issued;*
- 5) reason for not retrieving the pass from the visitor and/or not returning the identification card; and*
- 6) other relevant observations (for example, suspicious or emotionally charged behavior, use of rude language, demeanor).*

The main gate front-entrance assigned staff member must account for all visitor passes when coming on duty, immediately reporting any discrepancies to the shift supervisor. The post officer is also responsible for monitoring the inventory of visitor passes and identification

cards, and reporting to the shift supervisor any unusually long visits (as indicated by an identification card which has yet to be retrieved and/or a missing visitor’s pass which has yet to be returned).

2. Vehicle Entrance

a. Identification

The main-gate front-entrance assigned staff member shall control all (vehicle) traffic entering and leaving the facility. The officer shall check the driver’s license of the driver entering into the facility, regardless of purpose (e.g., visit, delivery), and may require proof of insurance, especially for vehicles to be driven on the grounds. The officer will also check the identification of every passenger in the vehicle. The officer may admit the vehicle only if the license and insurance are valid. While the driver is within the facility’s secure perimeter, the officer shall hold the driver’s license or identification of every person entering the facility, as specified under the “Visitor Passes” section in this standard.

b. Vehicle Log

The post officer shall log the following information regarding every vehicle: tag number, driver’s name, firm represented, purpose of the visit, (e.g., repairs, delivery, etc.), vehicle contents, date, time in, time out and facility employee responsible for the vehicle on-site.

c. Controls

- 1) The main-gate front-entrance assigned staff member shall search the vehicle before it enters or leaves the facility, both to prevent the introduction/removal of contraband and to prevent the vehicle’s use as a means of escape. All drivers making deliveries must submit to a personal search and questioning about firearms, munitions, knives, ropes, jacks, narcotics and other items considered contraband. (For more detailed information,

see standard “2.3 Contraband”).

- 2) Any article posing a threat to the facility’s security shall be held at the gate or removed from facility grounds. The driver of a delivery vehicle may be accompanied by one or more co-worker(s), but not by unauthorized passengers.
- 3) *The facility employee responsible for vehicle oversight shall, as escort:*
 - a) *walk behind the vehicle;*
 - b) *directly supervise loading and unloading;*
 - c) *retain the ignition keys, never leaving them in the vehicle; and*
 - d) *close windows, lock doors and trunks, secure toolboxes, ladders, etc., before leaving the vehicle unattended.*
- 4) *Before approaching the exit gate, the driver shall stop at a spot designated. The gate operator shall not allow the vehicle to depart until he/she is satisfied that neither the driver nor the escorting officer is under duress. With that established, officers shall again search the vehicle. If a thorough search is impossible to conduct, the vehicle shall be unloaded or held pending completion of the next official count. If the vehicle or vehicular equipment must remain inside the compound overnight, staff shall render it inoperable.*
- 5) *If the post officer has doubts about a person’s identity, he/she shall not permit the person to exit, pending positive identification.*
- 6) Staff shall handle any legal or special mail delivered to the facility for detainees in accordance with standard “5.1 Correspondence and Other Mail”

D. General Population Housing Units

1. Post Orders and Housing Records

For each housing unit, the facility administrator shall establish written post orders with step-by-step

procedures, in accordance with standard “2.9 Post Orders.” Those post orders shall require that housing officers maintain a housing unit log for recording information regarding routine unit operations, as well as unusual and emergency incidents.

Housing unit post orders shall follow the event schedule format, for example, “0515—Lights on” and shall direct the assigned staff member to maintain a unit log of pertinent information regarding detainee activity.

The shift supervisor shall visit each housing area and initial the log on each shift at least once per tour.

2. Supervision and Communication

Security officer posts shall be located in or immediately adjacent to detainee housing units to permit officers to see or hear and respond to emergency situations. Personal contact and interaction between housing staff and detainees shall be expected and required.

As prescribed by standard “2.9 Post Orders,” staff shall observe, supervise and control movement of detainees from one area to another. No detainee may ever be given authority over, or be permitted to exert control over, any other detainee.

The facility administrator, designated assistant facility administrator, supervisors and others designated by the facility administrator shall be required to visit all housing units weekly at minimum to observe living conditions and interact informally with detainees. Such visitors shall record their visits by initialing the housing unit log.

E. Special Management Unit (SMU)

Because Special Management Units are inherently among the most secure areas of any detention facility, special security and control measures are required for these units.

1. Control of Contraband and Tools

Every facility administrator shall establish a written policy and procedures to secure the SMU from

contraband.

Items allowed to enter SMUs shall be kept to an absolute minimum. Any item allowed into the unit, including laundry, commissary, food carts and personal property, shall be thoroughly inspected and searched to prevent the introduction of contraband.

In the event that it becomes necessary to introduce tools into the unit, special care shall be taken. Prior to entering, all tools shall be inventoried by the special housing officer. Tools shall be identified and checked against the inventory upon departing to ensure that no tools, hazardous objects, or materials are left in the unit.

2. Control of Entrances

In facilities with the ability to do so, the SMU entrance in regular use shall have a sally port, which shall be operated so that the inner and outer doors cannot both be open simultaneously. Officers on the inside and outside shall independently check the identification of every person going in or out, and each officer must positively confirm a person's identity before allowing him/her through the door.

Also, in accordance with written procedures established by the facility administrator, these officers shall take precautions to ensure that the person requesting entry or exit is not doing so under duress.

3. Control of Food Carts

Food carts shall be securely locked before leaving the food service area for delivery to the SMU. If this is not possible, a staff escort is required.

4. Control of Keys

Staff assigned to the SMU or SMU visiting area shall have keys to the inner door(s) of the sally port, but not to the outside door(s). Conversely, staff outside the SMU or SMU visiting area shall have keys to the sally port's outer door(s) but not the inner door(s). Under no circumstances shall one individual hold keys to both the inner and outer doors of the sally

port.

F. Security Inspections

1. Required Written Security Inspection Procedures

Each facility shall establish a comprehensive security inspection system that addresses every area of the facility, specifically including the perimeter fence line and other areas specified below in the standard.

Frequent unannounced security inspections shall be conducted on day and night shifts to control the introduction of contraband; identify and deter sexual abuse of detainees; ensure facility safety, security and good order; prevent escapes; maintain sanitary standards; and eliminate fire and safety hazards. Each facility shall prohibit staff from alerting others that these security inspections are occurring, unless such announcement is related to the legitimate operational functions of the facility.

Each officer who assumes a post assignment shall conduct a security check of the area, record the results in the post logbook, and prepare and submit maintenance work requests as necessary.

Documentation of all daily inspections—shift, area and post—is required. Completed inspection forms, along with the schedule of inspections shall be submitted to the Chief of Security. The daily inspection plan shall also provide guidelines for security-feature checks and for reporting security concerns, vulnerabilities and inconsistencies, such as inoperable security cameras.

The facility administrator shall identify the staff member responsible for the oversight of the facility's daily security inspection process.

Normally, the shift supervisor (or equivalent) shall handle this responsibility, under the Chief of Security (or equivalent). The shift supervisor or designee shall review all search and inspection documentation.

The shift supervisor or designee shall report recurrent maintenance work problems to the

department head and/or assistant facility administrator. Such problems include, for example, unresponsiveness to work orders, failure to take corrective action, and/or failed attempts to resolve a problem within a reasonable timetable.

2. Perimeter Inspections

Perimeter inspections shall occur frequently, but at irregular times, as follows.

- a. Walls, fences and exits, including all outside windows shall be inspected for defects at least once per shift, and perimeter alarm systems shall be tested daily.
- b. Once per shift or daily, at the facility administrator's discretion, locations on the grounds shall be inspected where detainees could arrange for visitors to leave contraband.
- c. Daily along the perimeter fence, checked by the assigned staff member(s):
 - 1) walking the entire fence line; checking the tension wire and binding straps and all hardware attached to the poles to ensure tautness; examining wings for cut links; and testing the links fastening the sides of the fence bottom to the fence; and
 - 2) simulating a detainee's climbing the fence by pulling on the fence. (Jerking the fence back and forth does not simulate climbing and is an insufficient simulation.) In a functional alarm system, the pull-test shall activate the alarm, after which staff shall immediately notify the control center of the need to reset the alarm. In the event that the fence-climbing simulation is insufficient to activate the alarm, the facility administrator shall be immediately notified so as to take corrective action.
- d. The facility maintenance supervisor and Chief of Security shall check the fence monthly, documenting the results in the shift supervisor's daily log.

3. Housing Units

Each facility administrator shall establish a written policy and procedures for housing unit and personal area searches and the use of canine units. Canine units may be used only for contraband detection. Canine units shall not be used for force, control or intimidation of detainees (see standard "2.15 Use of Force and Restraints").

a. Searches of Detainee Housing Areas

Staff may search a detainee's housing area and personal items without prior notice, without detainee approval and without the detainee being present. Housing area searches shall take place irregularly, so as not to establish a predictable pattern.

For a cell search, staff shall remove the detainee from the cell. Staff must pay particular attention to plumbing facilities, ventilators, beds, bedding, tables, chairs, books, etc., and be on the alert for contraband in false bottoms, hidden compartments, hollow legs, etc.

After the search, staff shall restore all items as close as possible to their original order.

b. Search Log

Each housing unit, including the SMU, shall document cell and area searches in a search log that registers the date, time and findings, including location where contraband was found, type of contraband and the searching officers' names.

4. Searches of Utility Areas

Staff shall conduct irregular searches of storage and supply rooms, plumbing accesses, walls (particularly around ventilators and windows), lighting and plumbing fixtures, drains, etc., in the housing areas. These searches shall occur at least once per shift.

5. Searches of Shops and Buildings

Assigned staff shall routinely inspect all areas of the facility, at odd hours, according to no fixed

schedule. For searches of areas with specialized equipment or supplies, the respective department head shall be present to ease access to locked areas and to help determine the status of any questionable items.

Staff shall document these searches in a logbook maintained by the shift supervisor.

G. Detainee-on-Detainee Physical Assaults

The facility administrator shall ensure that the FOD is notified of any physical assault on an ICE detainee by another detainee or inmate housed at the facility. This includes one or more detainees or inmates engaging in an act of violence against another ICE detainee or the intentional attempt to harm that detainee through force or violence, regardless of whether injury results or a weapon is used. The facility shall ensure a thorough investigation of any incidents of physical assault perpetrated on an ICE detainee, consistent with the requirements of Standard 3.1 “Disciplinary System.”

H. Staff-on-Detainee Physical Assaults

The facility administrator shall ensure that the FOD

is notified of any incident or allegation of a physical assault perpetrated by staff against a detainee. This includes any incident or allegation of facility staff engaging in an act of violence against a detainee, or any intentional attempt to harm that detainee through force or violence, regardless of whether injury results or a weapon is used. The facility shall ensure a thorough investigation of any incident or allegation of staff-on-detainee physical assault, and staff determined to have perpetrated a physical assault on a detainee shall be appropriately disciplined; the results of the investigation shall be transmitted to the FOD.

I. Staff Misconduct

The facility administrator shall ensure that the FOD is promptly notified of any incident or allegation of staff misconduct if that misconduct relates to treatment of ICE detainees, to the security or safety of the facility, or to compliance with detention standards or the provisions of the facility’s contract with ICE. Note that Standard 6.2 “Grievance System” also requires that ICE be notified of any allegation of staff misconduct that is contained in a detainee grievance.

2.5 Funds and Personal Property

I. Purpose and Scope

This detention standard ensures that detainees' personal property, including funds, valuables, baggage and other personal property, is safeguarded and controlled, and that contraband does not enter a detention facility.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may also be defined in standard "7.5 Definitions."

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in "V. Expected Practices"):

1. The security, safety and good order of each facility shall be maintained through an immediate search of each newly admitted detainee's property.
2. Each detainee's funds, valuables, baggage and personal property shall be inventoried, receipted, stored and safeguarded for the duration of their

detention.

3. Each detainee shall be informed of what funds and property may be retained in his/her possession, and of procedures to report missing or damaged property.
4. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces "Funds and Personal Property" dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-20, 2A-23, 2A-24, 6A-07(M)

V. Expected Practices

A. General

All detention facilities are required to have written policies and procedures to:

1. account for and safeguard detainee property from time of admission until date of release;
2. inventory and receipt detainee funds and valuables;
3. inventory and receipt detainee baggage and personal property (other than funds and valuables);
4. inventory and audit detainee funds, valuables and personal property;
5. return funds, valuables and personal property to detainees being transferred or released and
6. provide a way for a detainee to report missing or damaged property.

In many facilities, detainee funds are deposited in the detainee’s commissary or canteen account. Any facility without a commissary shall provide:

1. a cash box for currently held detainee funds, which can be accessed only by designated supervisor(s) and/or property officer(s);
2. valuable-property envelopes, which can be accessed only by designated supervisor(s) and/or property officer(s) or
3. a dedicated safe for the cash box and property envelopes.

All facilities, at a minimum, shall provide:

1. a secured locker for holding large valuables, which can be accessed only by designated supervisor(s) and/or property officer(s) and
2. a baggage and property storage area that is secured when not attended by assigned

admissions processing staff.

Both the safe and the large-valuables locker shall either be kept in the shift supervisor’s office or otherwise secured in an area accessible only to the shift supervisor.

The baggage and property storage area shall be maintained in a clean and orderly manner and inspected as often as necessary to protect detainee property.

B. Contraband

In accordance with standard “2.3 Contraband,” if any unauthorized personal property is contraband, it must be surrendered to staff for securing, receipting and inventorying.

C. Notice to Detainees

The detainee handbook or equivalent shall notify the detainees of facility policies and procedures related to personal property, including:

1. which items, including cash they may retain in their possession;
2. that, upon request, they shall be provided an ICE/ERO-certified copy of any identity document (e.g., passport, birth certificate), which shall then be placed in their A-files;
3. the rules for storing or mailing property not allowed in their possession;
4. the procedure for claiming property upon release, transfer, or removal;
5. the procedure for filing a claim for lost or damaged property and
6. access to detainee personal funds to pay for legal services.

D. Admission

Staff shall search all arriving detainees’ personal property.

Staff shall search and inventory detainee property

only in the presence of the detainee(s), unless instructed otherwise by the facility administrator.

Medical staff shall determine the disposition of all medicine accompanying an arriving detainee.

Standard operating procedure shall include obtaining a forwarding address from every detainee for use in the event that personal property is lost or forgotten in the facility after the detainee's release, transfer, or removal.

E. Limitations on Possession of Funds and Personal Property

1. The facility administrator shall establish whether a detainee may keep cash in his/her personal possession while in detention and, if so, how much cash each detainee may keep.
2. Detainees may keep a reasonable amount of personal property in their possession, provided it poses no threat to detainee safety or facility security. Detainees shall be granted an opportunity to store excess property with a third party or, with the facility administrator's permission, in the facility's personal property storage area.
3. Identity documents (e.g., passports and birth certificates) are held in each detainee's A-file. Upon request, staff shall provide the detainee a copy of a document, certified by an ICE/ERO official to be a true and correct copy.
4. For each housing area, the facility administrator shall designate a storage area for storing detainee personal property.

Each detainee shall be permitted to keep in his/her possession reasonable quantities of the following, as long as a particular item does not pose a threat to the security or good order of the facility:

1. small religious items including religious jewelry items;
2. religious and secular reading material

(softbound) and correspondence;

3. legal documents and papers, including property receipts;
4. up to ten photographs measuring no more than 5" x 7";
5. prescription glasses;
6. dentures;
7. personal address book or pages;
8. wedding ring; and/or
9. other item(s) approved by the facility administrator or chief security officer.

Examples of items detainees may not retain include the following:

1. *cash in excess of the established facility limit;*
2. *any negotiable instrument;*
3. *jewelry, other than small religious items and wedding rings;*
4. *other items of value, for example, cameras, radios, stereos;*
5. *personal clothing and hygiene items when the facility provides them;*
6. *drugs and medications not prescribed or authorized by facility medical staff and*
7. *prohibited publications, including but not limited to: publications depicting activities that present a substantial risk of physical violence or group disruption (e.g., material dealing with self-defense, weaponry, armaments, explosives, or incendiary devices); publications containing sexually explicit material; or publications describing the production of drugs, alcohol, or weapons.*

Every housing area shall have lockers or other securable space for storing detainees' authorized personal property. The amount of storage space shall be proportional to the number of detainees assigned

to that housing area.

Space constraints may cause the facility administrator to limit the number of newspapers, magazines, etc., allowed to each detainee.

F. Excess Property

To prevent overcrowding and related storage problems, staff shall encourage detainees to send extra suitcases, televisions and other “soft” (not illegal or dangerous) contraband to a third party of his/her choosing.

1. The facility may make shipping arrangements for a detainee requiring such help.
2. If a detainee does not provide an appropriate mailing address within 30 days of entry, the facility may make reasonable accommodations to store the property until the detainee’s removal or release. Ordinarily the amount stored may not exceed 40 pounds.
3. If a detainee does not provide an appropriate mailing address or is unable to pay the postage, the facility administrator may dispose of the property in accordance with standard “2.3 Contraband,” after providing the detainee with written notice.
4. When personal property is shipped, staff shall prepare an inventory record and shall maintain a copy in the detainee’s detention file.

G. Officer Processing of Funds and Valuables

Facilities lacking automated detainee funds systems must process detainee funds and valuables as follows.

1. Funds

For recordkeeping and accounting purposes, use of the G-589 Property Receipt form or its equivalent is mandatory to inventory any funds removed from a detainee’s possession, and a separate G-589 form or its equivalent is required for each kind of currency

and negotiable instrument.

Removal and inventory of detainee funds shall be conducted by at least two officers and in the presence of the detainee. Separate documentation should be made for each kind of currency and negotiable instrument, and should include detainee identification information and a description of the amount and type of currency or other negotiable instrument inventoried. Officers should then deposit the funds with a copy of the documentation in the drop safe or similarly secured depository.

The G-589 shall include:

- a. *the detainee’s A-number or facility detainee number in the center area, just above the biographic information;*
- b. *the ICE facility designation code (“DETLOC”);*
- c. *the current date;*
- d. *the complete name of the detainee, printed legibly;*
- e. *in the “Quantity” column, the number of checks, money orders, or other negotiable instruments and*
- f. *in the “Description” column:*
 - 1) *the amount and type of currency, the kind of check, money order, or other negotiable instrument;*
 - 2) *the name of the issuing bank, the register or check number and the account name;*
 - 3) *for U.S. currency, the dollar sign (\$) followed by the dollar amount (e.g., \$100); and*
 - 4) *for foreign currency, the currency amount followed by the type (e.g., 140 Japanese Yen, 300 Euros, 4,000 Mexican Pesos).*

For a detainee with more than one kind of negotiable instrument, the officers shall prepare as many G-589 or equivalent forms as necessary to list separately all checks, all money orders, each additional category of negotiable instrument; and

each type and amount of foreign currency.

If cash is returned to the detainee for possession inside the facility, staff shall record the transaction in the “Description” column of the affected G-589 form or equivalent.

The two officers and the detainee shall sign all copies, after which the copies shall be distributed as follows:

- a. white original/first copy to the detainee (property receipt);*
- b. blue/second copy to detainee’s I-385 booking card or detention file (attachment), and*
- c. pink/third copy to funds envelope (insert).*

The admissions processing officer shall record each Form G-589, or equivalent, issued and enter the initials and any corresponding identifiers of receipting officers in the facility’s G-589 Property Receipt Logbook, or equivalent. The officer shall then deposit an envelope containing the currency, checks, money orders, other negotiable items and G-589 receipt(s) in the drop safe.

2. Small Valuables, Including Jewelry

The Form G-589 or equivalent should be used to describe generally each item of value. The officers should then record the issuance of this Form G-589 in the facility’s Property Receipt Logbook or equivalent, place the valuables in a secured envelope, and deposit the envelope in the drop safe or similarly secured depository.

The Form G-589, or equivalent, shall describe each item of value. Jewelry shall be described in general terms (e.g., ring—“yellow/white metal with red/white stone”), with no mention of brand name or monetary value. The detainee and two processing officers shall sign the G-589 or equivalent with copies distributed as noted above in this standard. The officers shall then place the valuables (and pink/third copy of G-589) in a clear envelope, which they shall secure via approved techniques for tamper-

proofing.

The processing officer shall record the issuance of this G-589 in the G-589 Property Receipt Logbook or equivalent. The officer shall then deposit the secured valuables envelope and G-589 receipts in the drop safe provided. Zippered nylon bags are not authorized.

3. Large Valuables

Large valuables are items that do not fit into property envelopes, for example, televisions or musical instruments. The Form G-589 or equivalent should be used to describe generally each item of value. The officers should then record the issuance of this Form G-589 in the facility’s Property Receipt Logbook or equivalent, tag the large valuable with a copy of the Form G-589 and a Baggage Check (Form I-77), and secure the item(s) in the designated storage area. *The Form G-589, or equivalent, including a description of each item, shall be prepared and distributed as above. The large valuables shall then be tagged with a copy of the Form G-589 and a Baggage Check (Form I-77). The officers shall attach a copy of the Form G-589 and the center portion of the Form I-77 to the detainee’s booking card or detention file. The processing officer shall record the G-589 issuance in the facility’s G-589 Property Receipt Logbook or equivalent and secure the item(s) in the designated storage area.*

H. Supervisor Processing of Funds and Valuables

During each shift, the supervisory security officer shall verify the accuracy of all G-589 Forms or equivalent, record all funds and items in the drop safe or similarly secured depository in the supervisors’ property log, and verify the disposition of all large valuables in the designated secured locked area.

The supervisory security officer or equivalent shall remove the contents of the drop safe during his/her

shift and initial the G-589 accountability log. The supervisor shall:

- 1. verify the correctness of all G-589 Forms or equivalents;*
- 2. record the amount of cash and describe each item in the supervisors' property log and*
- 3. verify the proper disposition of funds and valuables by checking the sealed envelopes in the cash box, the property envelopes in the safe, and the safekeeping of all large valuables in the designated secured locked area.*

I. Officer Processing of Baggage and Personal Property Other Than Funds and Valuables

An itemized inventory of all detainee baggage and personal property (separate from funds and valuables) shall be completed during admissions processing using the personal property inventory form. Each facility shall inventory all property, even in the event that the property was previously inventoried by another facility and is contained in a sealed bag. If a detainee has no baggage, a facility container shall be provided to store his/her personal property.

A Form I-77 or equivalent shall also be issued for each separate item of baggage or container.

All detainee luggage and facility containers used for storing detainee personal property shall be secured in a tamper-resistant manner and shall only be opened in the presence of the detainee.

These procedures do not apply to identity documents (e.g., passports, birth certificates, etc.), which are held in each detainee's A-file.

The personal property inventory form must contain the following information at a minimum:

- 1. date and time of admission;*
- 2. detainee's complete name and A-number or facility detainee number;*

- 3. description, quantity and disposition of articles; disposition may be indicated as either:*
 - a. "S" for "safekeeping" (by the facility); or*
 - b. R" for "retained" (by the detainee);*
- 4. general condition of the property and*
- 5. signatures of the officer completing the inventory and the detainee.*

After being properly inventoried and inspected for contraband, all baggage and facility containers shall be tagged and stored securely.

A pre-numbered, three-part Form I-77 or its equivalent shall be issued for each separate item of baggage or container. The front side of the Form I-77 has three parts: top (Part I); center (Part II); and bottom (Part III), the reverse side of which provides additional space to describe and identify the baggage or container.

- 1. Each Form I-77 or its equivalent shall bear the detainee's full name and A-number/facility detainee number and the date.*
- 2. The detainee's signature must appear on both the top (Part I) and bottom (Part III) of the Form I-77 or its equivalent.*
- 3. The top part of the Form I-77 or its equivalent shall be attached to the detainee's property.*
- 4. The center part shall provide a brief description of the property container (for example, black suitcase, paper bag, etc.) and shall be attached to the detainee's booking card or detention file.*
- 5. The bottom part shall be given to the detainee and the reverse side shall also contain a brief description of the property container.*

All detainee luggage and facility containers used for storing detainee personal property shall be secured in a tamper-resistant manner (e.g., by a tamper-proof numbered tie strap) and shall only be opened in the presence of the detainee.

A logbook shall be maintained listing detainee name,

A-number or facility detainee number, I-77 number, security tie-strap number, property description, date issued and date returned.

Tagged baggage and other property tagged only with an Form I-77, or equivalent, shall then be stored in the facility baggage storage area.

J. Inventory and Audit

Both on-coming and off-going supervisors shall simultaneously conduct an audit of detainee funds, property envelopes and large valuables where physical custody of, or access to such items changes with facility shift changes. The property and valuables logbook shall record the date, time and the name of the officer(s) conducting the inventory. Any discrepancies shall be immediately reported to the Chief of Security, who shall follow facility procedure to ensure that all detainee funds and valuables are accounted for.

For each audit, facilities shall use Form G-786 Alien Funds Audit Sheet, or equivalent, reflecting, at a minimum, the following information:

- 1. Funds Held by Officers Other than the On-Duty Supervisor
At no time shall funds be held by officers other than the on-duty supervisor;*
- 2. Cash on Hand
The count is to be made by the incoming processing supervisor, who shall fill in the appropriate blanks with the amount of each denomination (U.S. currency);*
- 3. Checks, Money Orders, or Other Negotiable Items
The count is to be made by the in-processing supervisor, and the appropriate blanks are to be filled in reflecting the amount of checks, money orders and other negotiable items;*
- 4. Total of G-589 Property Receipts
This figure represents the total amount of funds, checks, money orders and other negotiable items as reflected by the copies of the Form G-589 or*

equivalents in the cash box;

5. Disbursed During Shift

This figure represents the total amount of funds disbursed during the shift. The out-going processing supervisor shall enter disbursal information;

6. Received During Shift

This figure represents the total amount of funds collected during the shift. The out-going processing supervisor shall complete this information;

7. Cash on Hand at End of Shift

This figure represents the amount on hand as counted by the out-going processing supervisor. (If the logged figure does not match with the cash currently on hand, a new audit shall be conducted.) The Chief of Security or equivalent shall follow facility procedures to ensure that all detainee funds and valuables are accounted for; and

8. Number of Sealed Property Bags

In facilities without commissaries, a comprehensive weekly audit shall be completed jointly by the detention operations supervisor or equivalent, and a detention staff member. The audit shall be logged in the property and valuables logbook. Discrepancies shall be reported to the Chief of Security (or equivalent). The Chief of Security or equivalent shall take the necessary steps, according to facility policy, to ensure that all detainee funds and valuables are accounted for.

An inventory of detainee baggage and other non-valuable property shall be conducted by the facility administrator's designee at least once each quarter.

The facility's inventory audit shall indicate the inventory's date and time, and the name of the officer(s) conducting the inventory. Any discrepancies shall be reported immediately to the facility administrator.

K. Release or Transfer

After checking the I-385 Form or equivalent, wristbands and property receipts to positively identify the detainee being released or transferred, the detainee shall present the white copy of both the G-589 Form(s) and I-77 Form(s) or equivalents for all receipted property.

Staff shall compare signatures on Form I-77 receipt portions, and match cash funds, negotiable instruments, and valuables against property descriptions on G-589 forms.

For each I-77 presented, staff shall compare the signature on the detainee's portion with the portion on the stored item and the portion on the booking card. Depending on the size and kind of funds and valuables listed on the G-589, staff shall conduct checks as follows:

1. Small Valuables

Match the contents of the property envelope against the itemized list on all three copies of the G-589 Form or equivalent.

2. Large Valuables

Match the tagged items against the description on all three copies of the G-589 Form or equivalent.

3. Negotiable Instruments

Match the negotiable instruments against the description on all three copies of the G-589 Form or equivalent.

4. Cash Funds

Compare the property description(s) on the white, pink and blue copies of the G-589 Form or equivalent.

After the property check, the property shall be returned to the detainee. The detainee shall then sign the blue/second copy of the G-589 Form or equivalent, indicating his/her receipt of all funds and personal property due him/her. The property log and inventory sheets shall reflect the transaction.

L. Lost or Damaged Property

1. General

Supervisory personnel shall be notified when properly receipted detainee property is reported missing or damaged. Supervisory staff shall investigate and, if necessary, take prompt action to prevent further loss.

If the property is not recovered or is recovered, but in damaged condition, staff shall prepare a report for the facility administrator, providing: a description of any damage; the circumstances under which the property was last seen; the circumstances under which the loss or damage was discovered; and sworn statements from the detainee and all witnesses.

If the property is not recovered or is recovered, but in damaged condition, staff shall prepare a report for the facility administrator, providing:

- a. name and A-number/facility detainee number of the detainee claiming ownership;*
- b. description of the property and, if applicable, damage;*
- c. date and time the loss or damage was discovered;*
- d. name(s) of person(s) discovering the loss or damage;*
- e. the circumstances under which the person(s) discovered the loss or damage;*
- f. names and statements of all witnesses;*
- g. place, date and time the property was last seen (before reported missing or damaged);*
- h. the circumstances under which the property was last seen (before reported missing or damaged); and*
- i. sworn statements from the detainee and all witnesses.*

A detainee being transferred, released, or removed from the country with a property claim shall be allowed to initiate the claim before leaving the facility. The facility administrator shall forward the result of the claim to the claimant's forwarding address (provided upon admission or in conjunction

with the claim).

2. Lost or Damaged Property in SPCs

In addition to all procedures specified above, SPC staff must complete Form I-387 Report of Detainees Missing Property for missing property (but not for damaged property). The original copy of this form shall be placed in the detainee's A-file. The facility shall retain a copy.

In accordance with the administrative manual, the facility administrator shall report allegations of impropriety against staff in the handling of detainee funds or valuables.

3. Lost and Damaged Property

All facilities shall have and follow a policy for loss of or damage to properly receipted detainee property, as follows:

- a. all procedures for investigating and reporting property loss or damage shall be implemented as specified in this standard;
- b. supervisory staff shall conduct the investigation;
- c. the senior facility contract officer shall promptly process all detainee claims for lost or damaged property;

- d. the official deciding the claim shall be at least one level higher in the chain of command than the official investigating the claim;
- e. the facility shall promptly reimburse detainees for all validated property losses caused by facility negligence;
- f. the facility may not arbitrarily impose a ceiling on the amount to be reimbursed for a validated claim; and
- g. the senior contract officer shall immediately notify the designated ICE/ERO officer of all claims and outcomes.

M. Abandoned Property

All facilities shall report and turn over to ICE/ERO all detainee abandoned property.

1. Contraband shall be handled in accordance with standard "2.3 Contraband."
2. Property that is of minimal value, broken, or clearly abandoned shall be discarded.
3. Because property obtained through non-appropriated funds cannot be donated, donations of abandoned property to charitable organizations are prohibited.

2.6 Hold Rooms in Detention Facilities

I. Purpose and Scope

This detention standard ensures the safety, security, and comfort of detainees temporarily held in hold rooms while awaiting further processing. An individual may not be confined in a facility's hold room for more than 12 hours.

Hold rooms are used for detention of individuals awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of a facility.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

For all types of facilities, procedures that appear in italics with a marked (**) on the page indicate optimum levels of compliance for this standard.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. The safety, security and comfort of detainees temporarily confined in hold rooms shall be ensured.
2. No detainee shall be confined in a hold room for more than 12 hours.
3. Males and females shall be confined separately.
4. Minors (persons under 18) shall be held apart from adults, except for documented related adults or legal guardians, provided this arrangement incites no safety or security concerns.
5. Any detainee with a disability, including temporary disabilities, shall be held in a manner that provides for his/her safety, comfort and security.
6. Detainees awaiting a medical visit shall be seen within two hours.

III. Standards Affected

This detention standard replaces “Hold Rooms in Detention Facilities” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 1A-04, 1A-09, 1A-10, 1A-11, 1A-14, 1A-19, 1A-20, 1A-21, 6B-04.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.6 Hold Rooms in Detention Facilities”;
- “2.10 Searches of Detainees”;
- “2.15 Use of Force and Restraints”; and
- “4.6 Significant Self-harm and Suicide Prevention and Intervention.”

ICE/ERO “Family Residential” standards “Searches of Residents.”

ICE/ERO “Family Residential” standards “Use of Physical Force.”

V. Expected Practices

A. Physical Conditions

Based on the ICE/ERO Hold Room Design Guide, hold rooms in SPCs and CDFs must comply with the criteria in italics in this subsection. All other facilities are encouraged to make appropriate modifications to meet the criteria specified in the ICE/ERO Hold Room Design Guide.

1. *Each hold room shall be situated within the facility's secure perimeter.*
2. *Each single-occupant hold room shall contain a minimum of 37 square feet (seven unencumbered square feet for the detainee, five square feet for a combination lavatory/toilet fixture and 25 square feet for wheelchair turnaround). Multiple-occupant hold rooms shall provide an additional seven square feet of unencumbered space for each additional detainee. "Unencumbered space" does not include space taken up by benches and tables.*
3. *Each hold room shall be well ventilated and well lit. All activating switches and controls shall be located outside the room, in places accessible to staff only.*
4. *Each hold room shall contain sufficient seating for the maximum room-capacity but shall contain no moveable furniture. Benches shall provide 18" of seat space per detainee and may be bolted to the floor or attached to the wall if the wall is of suitable construction.*
5. *Bunks, cots, beds and other sleeping apparatus are not permitted inside hold rooms. Exceptions shall be made for detainees who are ill, and for minors and pregnant women.*
6. *Each hold room shall be equipped with stainless steel, combination lavatory/toilet fixtures with modesty panels, in compliance with the applicable federal and state accessibility standards. Consistent with the International Plumbing Code:*
 - a. *each small hold room (up to 14 detainees) shall have one combination unit; and*
 - b. *each large hold room (15 to 49 detainees), shall have at least two combination units. (The Hold Room Design Standards A-E, HDR Architecture, recommends a third combination unit for a hold room with 30 or more detainees, or one combination unit for every 15 detainees.)*
7. *Each hold room shall have floor drain(s).*
8. *Hold-room walls shall be escape- and tamper-proof (e.g., an eight-inch, reinforced concrete masonry unit wall). Impact-resistant, steel-studded surfaces shall meet this standard in existing buildings that cannot support reinforced concrete. The walls shall extend and be built into the floor/room structure above. Ceilings shall also be escape- and tamper-proof, preferably 10 to 16 feet high but no less than nine feet, except in currently existing facilities with lower floor-to-floor heights.*
9. *Each hold room shall have two-inch thick, detention-grade 14-gauge steel doors that swing outward, and the 14-gauge steel doorframes shall be grouted into the surrounding wall. Also required are tamper-resistant bolt locks, door-mounted with paracentric keys or jamb-mounted with mogul keys.*
10. *The solid doors shall be equipped with security-glass or barred windows, 12"x12", installed at eye level for convenient visual checks. Security bars or mesh doors shall be of appropriately sturdy construction to prevent escape.*
11. *Primary surveillance shall be through observation windows to the side of the hold-room doors. Observation windows shall start about three feet from the floor and extend no higher than the top of the door.*
12. *The glazing shall meet or exceed the impact-resistant standard of glass-clad polycarbonate*

laminate. Window jambs shall be 14-gauge steel.

13. Detainees shall have access to potable water in hold rooms.

B. Unprocessed Detainees

An individual may not be held in a hold room for more than 12 hours.

1. Unaccompanied minors (persons under 18) and parent(s) or legal guardians accompanied by minor children shall not be placed in hold rooms, unless they have shown or threatened violent behavior, have a history of criminal activity, or have given staff reasonable grounds to expect an escape attempt. As soon as it is determined that an unaccompanied minor is being detained, immediate efforts shall be coordinated with the ICE/ERO Juvenile Family and Residential Management Unit (JFRMU) to move the minor within 72 hours, to an approved facility designated for the placement of unaccompanied minors by the U.S. Department of Health and Human Services Office of Refugee Resettlement (ORR) procedures. While in custody juveniles shall be detained in the least restrictive setting appropriate to the juvenile's age and special needs, provided that such setting is consistent with the need to protect the juvenile's well-being and that of others, as well as with any other laws, regulations, or legal requirements.
2. Persons exempt from placement in a hold room due to obvious illness, special medical, physical and or psychological needs, or other documented reasons shall be seated in an appropriate area designated by the facility administrator outside the hold room, under direct supervision and control, barring an emergency. If the physical layout precludes holding such individuals outside the hold room, they may be held in separate rooms, if available.
3. Males shall be segregated from females at all times (even if married).
4. Any minor (persons under 18) shall be held apart from adults, minimizing sight, sound, and physical contact, unless the juvenile is in the presence of an adult member of the family unit (determined through reliable evidence of a family relationship) or legal guardian, and provided there are no safety or security concerns with this arrangement. (For more information regarding juveniles, see *Flores v. Reno.*)
5. Detainees with open, obvious, apparent, or other identified disabilities, including temporary disabilities, shall be housed in a manner that accommodates their disability(ies) and provides for safety, comfort and security.
6. Detainees shall be provided with basic personal hygiene items (e.g., water, disposable cups, soap, toilet paper, feminine-hygiene items, diapers and sanitary wipes), as appropriate.
7. If the hold room is not equipped with restroom facilities, the shift supervisor shall position an officer within sight or earshot of the hold room, to provide detainees with regular access to toilet facilities, which shall be as close as possible within the facility's security perimeter. Detainees using the restroom shall be closely monitored, under direct supervision. Detainees with disabilities shall be provided appropriate assistance and access to accessible toilet facilities in the hold room or holding area.

C. Detainee Search

Officers shall inspect parcels, suitcases, bags, bundles, boxes and other property before accepting any item of property.

Before placing a detainee in a room, staff shall do a pat-down search for weapons or contraband.

1. The pat-down search shall be done by a staff member of the same gender as the detainee, unless one is not available.
2. A pat-down search is required, even if another section

or agency claims to have completed one.

If the pat-down search indicates the need for a more thorough search (e.g., in cases of reasonable suspicion of contraband or weapon possession), a strip search shall be conducted, in accordance with standard “2.10 Searches of Detainees” and/or the “Family Residential” standard on “Searches of Residents.”

Staff shall remove from a detainee’s possession any sharp objects, including pens, pencils, knives, nail files and other objects that could be used as weapons or to deface property.

D. Basic Operational Procedures

1. Before placing a detainee in a hold room, an officer shall observe and evaluate whether the detainee presents any open, obvious or apparent disabilities, mental health concerns, or other special needs. If any such special needs, including any disabilities, or concerns, are apparent, the officer shall notify appropriate staff.
2. Each facility shall maintain a detention log (manual or electronic) into which the hold room officer shall immediately enter specific information on an ICE/ERO detainee’s placement in a hold room.

The detention log shall record each detainee’s:

- a. name;
- b. sex;
- c. age;
- d. A-number;
- e. nationality;
- f. reason for placement;
- g. time in;
- h. time out; and
- i. date and time of new age determination.

The log shall also provide space to record meal

times, visual checks, security concerns (which may also necessitate an incident report) and comments.

3. Meals:

- a. Officers shall offer a meal to any adult held in a hold room for more than six hours. (Officers shall question newly arrived individuals to determine when he/she last ate, and, if appropriate, provide a meal soon after arrival in the hold room.)
 - b. Each minor shall receive meal service regardless of the time in custody or time of arrival.
 - c. Minors, pregnant women and others with evident medical needs shall have access to snacks, milk and juice.
 - d. To the extent practicable, officers shall be sensitive to detainees’ cultural, religious and medical culinary restrictions and differences.
4. Staff shall ensure that sanitation, temperatures and humidity in hold rooms are maintained at acceptable and comfortable levels. Minors, pregnant women and others with evident medical needs shall have temporary access to temperature-appropriate clothing and blankets.
 5. Officers shall closely and directly supervise hold rooms through the following means:
 - a. continuous auditory monitoring, even when the hold room is not in the officer’s direct line of sight;
 - b. visual monitoring at irregular intervals at least every 15 minutes, each time recorded in the detention log, to include the time, the officer’s printed name, and any unusual behavior or complaints under “comments”; and
 - c. constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. In such cases, the officer shall notify the shift supervisor. (See standard

“4.6 Significant Self-harm and Suicide Prevention and Intervention.”)

6. Staff shall not permit detainees to use tobacco products in a hold room.
7. The occupant load/detainee capacity shall be posted outside of each holding cell.
8. *No officer may enter a hold room unless another officer is stationed outside the door, ready to respond as needed. Officers may not routinely carry firearms, pepper spray, a baton or any other non-deadly force devices into a hold room, and any required physical force to control a situation shall be in accordance with standard “2.15 Use of Force and Restraints” and/or the “Family Residential” standard on “Use of Physical Force.”*
9. When the last detainee has been removed, officers shall ensure the hold room is thoroughly cleaned and inspected for any evidence of tampering with doors, locks, windows, grills, plumbing, electrical fixtures, or contraband, and shall report any such problems to the shift supervisor for corrective action or repair.

E. Fire, Building Evacuations and Medical Emergencies

1. The facility administrator shall develop and

distribute a written plan to be followed in the event of a fire, building evacuation, or medical emergency.

Evacuation procedures shall include posting the evacuation map and advance designation of the officer responsible for removing detainees from the hold room(s) in case of fire and/or building evacuation.

2. Staff shall immediately:
 - a. contact the medical emergency service when a detainee appears to be in need of urgent medical treatment; and
 - b. notify the supervisor of any such emergencies.
3. If a detainee is removed from a hold room for medical treatment, an officer detail shall accompany and remain with that detainee until medical personnel determine whether the condition requires hospitalization.
 - a. If the detainee is not hospitalized, the officer detail shall remain with the detainee until treatment is complete and then escort the detainee back to the facility.
 - b. If the detainee is hospitalized, the officer detail shall notify the supervisor and await further instructions.

2.7 Key and Lock Control

I. Purpose and Scope

This detention standard enhances facility safety and security by requiring that keys and locks be properly controlled and maintained.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs and CDFs. IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

For all types of facilities, procedures that appear in italics with a marked (**) on the page indicate optimum levels of compliance for this standard.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. All staff shall be trained in the proper care and handling of keys and locks.
2. Keys shall be accounted for and controlled.
3. Locks and locking devices shall be continually inspected, maintained and inventoried.
4. All firearms shall be stored in secure gun lockers before their carriers enter the facility.

III. Standards Affected

This detention standard replaces “Key and Lock Control” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2D-01, 7B-10.

V. Expected Practices

A. Proper Care and Handling of Keys and Locks

All staff shall be trained in and held responsible for adhering to proper procedures for the care and handling of keys, including electronic key pads where used. Initial training shall be completed before staff is issued keys, and key control shall be among the topics covered in subsequent annual training. Ordinarily, such training shall be done by the security officer (key control officer), as described below.

1. *An employee who leaves the facility with a key ring shall return it immediately upon realizing his/her mistake or when instructed to by the facility. Such an act shall constitute unauthorized possession of facility property as well as a breach of security procedures.*
2. *An employee who loses, misplaces, or otherwise cannot account for a key or key ring shall immediately alert the shift supervisor and promptly submit a written report.*
3. *Under no circumstances shall staff allow a detainee to handle facility keys.*
4. *Key rings, including those for gun lockers, shall be securely fastened to a belt with a metal clip or other approved device. Fastening keys to a holster or belt loop is prohibited.*
5. *Employees shall not refer to key numbers or other*

means of key identification within earshot of a detainee.

6. *Employees shall neither throw nor slide keys to one another.*
7. *Locks should not be forced. If a key fails to operate a lock, a supervisor shall be notified immediately.*
8. *If a key breaks inside a lock, the employee shall maintain visual oversight of the lock until the problem is repaired. If the key breaks inside a padlock, the padlock itself shall be removed and taken to the control center. In every instance, the employee shall submit a memorandum on the incident to the facility administrator.*
9. *Facilities shall use key covers for large security keys to prevent detainees or other unauthorized persons from observing and duplicating them.*

B. Security Officer (Key Control Officer)

Each facility administrator shall establish the position of security key control officer, or at a minimum, shall assign a staff member the collateral security officer duties, as described herein.

1. Major Duties and Responsibilities of the Security Key Control Officer

The security key control officer shall have a written position description that includes duties, responsibilities and a chain of command

The security key control officer:

- a. *reports directly to the Chief of Security;*
- b. *conducts physical security surveys of all buildings and provides the Chief of Security written recommendations regarding deficiencies and needed corrective actions;*
- c. *plans and implements adequate preventive maintenance/replacement locks and other security devices;*
- d. *identifies technical problems or malfunctions in*

electronic/automated and manually operated security systems and immediately repairs them or coordinates prompt repairs with the facility maintenance department;

- e. *overhauls, adjusts and replaces worn parts on locking devices and systems;*
- f. *maintains, adjusts and services machines used in the lock shop;*
- g. *is trained in operation of gas/oxygen-cutting tools and end-saw equipment in case of an emergency;*
- h. *conducts routine tests on emergency-exit doors;*
- i. *checks the keys to all emergency exits every 30 days and all other keys needed in emergencies quarterly, and documents the results; and*
- j. *reviews all major work orders and in-house designs, plans and specifications with the facility maintenance department for compliance with security requirements.*

The facility maintenance supervisor, or equivalent, shall consult with the Chief of Security or equivalent and security officer before proceeding with new construction and renovation projects involving door hardware.

2. Required Locksmith Training

All security key control officers shall successfully complete an approved locksmith-training program.

The security key control officer shall complete an approved locksmith training program.

This training shall be supplemented with additional training in Occupational Safety and Health Administration standards and the National Fire Prevention Association's life safety codes. Manufacturer's instructions, user manuals, product orientations and demonstrations also provide useful guidance and shall be housed in a secure location.

3. Administrative Responsibilities

The security key control officer is responsible for all

administrative duties, including record keeping, concerning keys, locks and related security equipment.

The security key control officer or equivalent:

- a. maintains a record keeping system that cross-references keys in the control center and lock shop, alphabetically and numerically, to facilitate quick identification of the key or key ring needed for a particular lock;*
- b. maintains accurate inventories of padlocks in use, master keys for cabinets, key blanks and all keys currently in use; and*
- c. maintains, for the historical record, a collection of reference material on locking devices and systems, including devices and systems previously used in the facility.*

4. Supervision and Training

The security key control officer shall train and direct employees in key control, including electronic key pads where used.

The security key control officer is responsible for training an assistant security officer in all duties related to the position. The security officer must be proficient in all phases of security and be able to demonstrate proper equipment use to other employees.

C. Lock Shop Operation

1. Inventories

The security key control officer shall maintain inventories of all keys, locks and locking devices in the lock shop.

Lock shop inventories shall include, at a minimum, the following:

- a. A secure master-key cabinet containing at least one pattern key (never issued), and one or more spare keys. The cabinet shall be kept locked; except when in immediate use. The contents shall be itemized on an inventory form;*

- b. All key blanks, identified by model number and manufacturer's name, inventoried in a bound ledger or electronic database;*

- c. All unassigned padlocks; and*

- d. An inventory of assigned padlocks, with locations identified alphabetically or numerically.*

2. Compromised Keys and Locks

The facility administrator or Chief of Security shall establish procedures for handling compromised keys and locks.

Note: Compromised keys shall be cut into pieces until irretrievably destroyed. The facility shall document the type of key or lock, the number of keys or locks compromised and the date, time and method of destruction.

3. Safe Combinations

The security key control officer shall implement procedures for protecting the integrity of all safe combinations.

Note: The combination for each safe shall be changed at least every 12 months and any time a staff member with access to a combination is assigned to another post. The combination to a safe shall be sealed in an envelope bearing across the flap the date and signature of the person who deposited and sealed the combination inside the envelope. Any person(s) authorized to open the envelope shall be listed, by name and title, on the front of the envelope. Envelopes containing safe combinations shall be stored in the lock shop.

4. Keying, Authorized and Non-Authorized Locks

- a. Either deadbolts or deadlocks shall be used in detainee-accessible areas.*
- b. Locks not authorized for use in detainee-accessible areas include, but are not limited to: snap-, key-in-knob, thumb-turn, push-button, rim-latch, barrel or slide bolt and removable-core-type locks (including padlocks). Any such*

locks in current use shall be phased out and replaced with mortise lock sets and standard cylinders.

- c. Grand master-keying systems are not authorized.
- d. A master-keying system may be used only in housing units where detainees have individual room keys. The number of doors shall be kept to a minimum and the unit officer's key must override all functions of such locks.
- e. After removing the facility number and key cuts, the security key control officer shall cut up and dispose of worn or discarded keys and locks.
- f. Entrance/exit door locks of housing units, work areas, chapels, gyms and other areas with room capacity of 50 or more people shall meet the standards specified in the Occupational Safety and Environmental Health Manual (Chapter 3) and in the National Fire Protection Association Life Safety Code (#101). Specifically, the doors shall be equipped with prison type locking devices modified to function when pressure is applied from inside the room. Panic-hardware is an acceptable alternative to the prison-type-locking device.
- g. Individual doors to areas with room capacity of 50 or more people shall have no more than one lock each. Padlocks shall not be used on exit doors or intermediate doors along the exit route.
- h. Padlocks and/or chains may not be used on cell doors.
 - 1) *Padlocks and hasps may be used only where specified below:*
 - a) *fence-gates in areas without ceilings;*
 - b) *freezer-door interiors whose lock -release systems include panic-release device(s); and*
 - c) *vehicle roll-up door walk-through exit(s).*
 - 2) *Entrances and exits from the secured perimeter shall be controlled by sally ports, with all*

doors and gates interlocking electronically. (Controls shall be set such that only one door can unlock at a time, canceling the electrical control of other doors until the unlocked door is returned to its secure position.)

- 3) *Under no circumstances may prison-type security keys and/or blanks—active, non-active, or discarded—be used or distributed for presentation purposes.*

5. Preventive Maintenance

The security key control officer, or designee, shall implement a preventive maintenance program.

The security key control officer shall perform preventive maintenance services, including but not limited to the following:

- 1) *adjust and service all cellblock-locking mechanisms in the Special Management Unit and in housing units with secure rooms, annually at a minimum;*
- 2) *adjust and service vehicle-gates for changing (i.e., hot/cold) weather conditions twice a year, in the spring and early fall;*
- 3) *adjust and service front-entrance and other gate operations at least once a year;*
- 4) *lubricate all other locks quarterly, per manufacturers' instructions;*
- 5) *perform maintenance checks on locks and locking systems, taking corrective action as necessary; and*
- 6) *once every five years, at least:*
 - a) *steam-clean vehicle-gates; and*
 - b) *clean locking mechanisms of front-entrance gates, other gates and cellblock locking mechanisms using steam or other means.*

The facility maintenance supervisor is responsible for door-hardware installation and maintenance (e.g., closures, hinges, pulls, kick plates, etc.), and for providing certain support

services (e.g., welding, electrical-work) to the security officer, as needed.

6. Preventive Maintenance Documentation

The security key control officer shall maintain all preventive maintenance records.

The security key control officer's preventive maintenance files shall include:

- a. date;*
- b. location of lock or locking mechanism;*
- c. type of maintenance performed;*
- d. rationale for changing key combination(s); and*
- e. signature of service provider.*

D. Key Cabinet

1. Location

An operational keyboard large enough to accommodate all facility key rings, including keys in use, shall be located in a secure area.

This operational keyboard shall be located in the control center. An electronic key control box may be placed outside the control center if in a secure unit.

2. Basic Construction

The key cabinet shall be constructed so that keys are visible only when being issued. Keys may never be seen by detainees or visitors.

Small, closet-type space in the control center may be used instead of a cabinet, as long as:

- a. access limitations are the same as for a key cabinet;*
- b. all other key/lock standards are met; and*
- c. the space is used solely for key control.*

In the key cabinet:

- a. keys in vertical rows shall be arranged in alphabetical order,*
- b. keys in horizontal rows shall be arranged in*

numerical order.

- c. the label identifying the letter or number of the key ring that belongs on a particular hook shall be visible even when the key ring is on the hook, and*
- d. any hook without an assigned key ring shall be tagged with a metal chit that indicates "hook not in use."*

3. Key Rings

The security officer shall implement procedures for identifying every key ring and every key on each key ring, and for preventing keys from being removed from key rings, once issued.

All key rings shall be heavy-gauge wire that has been welded or brazed to prevent removal of keys from the ring.

Two metal tags of unequal size shall be attached to each key ring:

- a. the larger tag shall identify the key ring with a number/letter corresponding to the hook number/letter; and*
- b. the smaller tag shall identify the number of keys on the key ring.*

4. Emergency Keys

Emergency keys shall be on hand for every area to or from which entry or exit might be necessary in an emergency.

- a. Emergency keys may be kept in a separate key cabinet or in a readily identified area of the regular-issue key cabinet. A separate key cabinet located in the control center is recommended for the emergency keys.*
- b. The emergency key cabinet shall contain a hook for each key ring. If an emergency key ring is kept outside the main emergency key cabinet (e.g., in a tower), a metal tag providing the key ring's location shall hang on the hook intended for that key ring in the main emergency key*

cabinet.

- c. *The emergency keys shall be cut precisely to manufacturer's specifications.*
- d. *Emergency keys shall not be rotated in and out of the lock shop.*

E. Issue of Key Rings

1. Chit System

Facilities shall use a chit system or other standard system for the issuance and accountability of key distribution. A key chit is a tag (usually metal) that identifies the person who has drawn a set of keys.

The chit shall be labeled with the officer's first initial and last name. All key rings shall be issued as needed (e.g., at the beginning of a shift, etc.) with the exchange of a chit for a key and with the chit placed on the hook from which the key was removed.

An employee who reports to work without chits must obtain temporary chits from the control room officer, which he/she can exchange for keys according to standard procedure.

- a. *The control room officer shall maintain accountability for the issued chits.*
- b. *At the end of the shift, the employee shall personally return the temporary chits to the control room officer.*

At shift rotation, to obtain keys from an officer on post, the relief officer must first exchange his/her key chit at the control room center for the key chit of the employee being relieved. The relief officer shall take his/her key chit to the employee being relieved and exchange the key chit for the appropriate ring of keys. The officer shall then count the keys on his/her ring, immediately reporting any discrepancies to the shift supervisor. If the relief officer needs to gain access to any location while heading from the control enter to his/her post, the control room officer may issue him/her a second set of keys. In such a case, the officer shall return the extra set of keys to the control room officer at the

end of the relief shift.

2. Restricted Keys

The facility administrator shall establish rules and procedures for authorizing use of restricted keys.

The control room officer must have authorization from the shift supervisor to issue a restricted key.

- a. Pharmacy
Pharmacy keys shall be strictly controlled.

Ordinarily, such controls include:

- 1) maintaining pharmacy keys in a restricted keys cabinet in the control room, and issuing them only to authorized pharmacy staff; and
- 2) maintaining a second set of pharmacy keys in the lock shop.

In the event of a non-medical emergency that necessitates entry into the pharmacy by anyone other than authorized pharmacy staff, the highest-ranking supervisor on duty may authorize immediate entry to the pharmacy. The supervisor shall then document the reasons for entry and sign the authorization.

Such documentation shall not impede the immediate provision of emergency medical care to a detainee by medical staff.

- b. ICE and EOIR Offices

Keys to ICE and the Executive Office for Immigration Review (EOIR) office and courtroom areas shall similarly be restricted and controlled. In the event that a key is authorized for emergency withdrawal, a copy of the restricted key form is to be provided to ICE.

3. 24-Hour Issue Keys

No key or key ring may be issued on a 24-hour basis without the facility administrator's written authorization.

A key chit identifying the borrower of the key ring shall be placed on the appropriate hook in the key cabinet, along with a metal tag marked "24-hour

issue.”

Individual authorizing record forms shall be used to record the following information about each set of 24-hour-issue keys: the key ring identifiers (number and title), the number of keys on the ring, the individual key numbers and the door each key unlocks. Each record must bear the signatures of the authorizing facility administrator, Chief of Security and the employee to whom the keys are issued.

4. Security Keys

Key rings used but not issued on a 24-hour basis because of the attached security keys shall be kept in a dedicated glass-front, lockable box in the control center. Identical boxes may be kept and used in different departments, provided staff members are authorized to receive 24-hour keys. The key to every such box shall be issued on a 24-hour basis.

The staff member removing keys from the box shall place his/her chit on the hook in place of the key ring, and shall return the keys and reclaiming the chit at the end of the shift. The individual to whom the keys were issued shall personally return the keys to the box, without exception.

Security keys may not be taken off facility property (except for bus, van and other authorized-vehicle keys). As a rule, security keys shall not be issued on a 24-hour basis.

5. Key Accountability

The facility administrator shall establish written policy and implementation procedures to ensure key accountability.

The control room officer shall conduct a key ring audit upon reporting for duty, accounting for each key ring in the control center logbook, and shall immediately report discrepancies in the record to the shift supervisor.

The control room officer shall also identify broken or bent keys. All keys (regular-issue and emergency) shall be checked and counted daily.

To ensure accountability, keys shall be issued only on the assigned key rings.

6. Request for Key Change

Key-change requests shall be submitted, in writing, to the facility administrator. Upon facility administrator approval, only the security officer may add or remove a key from a ring.

7. Split Key Ring

The splitting of key rings into separate rings is not authorized.

F. Gun-Locker Keys

Officers shall store all their weapons in individual lockers before entering the facility.

The facility administrator shall develop and implement site-specific procedures for controlling gun-locker access.

In all facilities, gun lockers shall:

1. be placed in locations where officers can continuously observe them, in person or on a video-monitor, and not in any area that has detainee or public access;
2. be used to store the weapons of all on-duty officers, except those whose assignments require them to carry weapons; and
3. not be used for long-term storage. (A staff member may arrange with the facility firearms control officer for long-term storage of a weapon in the armory.)

Chits and logbooks are useful for maintaining accountability for gun locker keys and gun locker use.

2.8 Population Counts

I. Purpose and Scope

This detention standard protects the community from harm and enhances facility security, safety and good order by requiring that each facility have an ongoing, effective system of population counts and accountability for detainees.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs and CDFs. IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcome

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

Security, safety and orderly facility operations shall be maintained through an ongoing, effective system of population counts and accountability for detainees.

The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials

in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Population Counts” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-16, 2A-17.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.9 Post Orders”; and
- “4.3 Medical Care.”

V. Expected Practices

A. Formal Counts

Formal counts are conducted in a predetermined manner at specific times of the day and night. A formal count shall be conducted at least once every eight hours, with a shift supervisor verifying its accuracy. Additional counts, at the discretion of the

facility, are encouraged.

1. *The formal count(s) shall be conducted at least once every eight hours (once per shift at minimum) at times determined by the Chief of Security. Counts shall be scheduled to achieve full accountability with minimal interference with daily work and activity schedules.*
2. *Count procedures must be strictly followed. If the accuracy of a count is in doubt, the officers shall do a recount and any other double-checking necessary. Officers performing the count shall never rely on a roll call.*
 - a. *An unaccompanied officer shall never perform a count in an open area (e.g., housing units, food service area). One officer shall count while a second officer observes all detainee movements, to ensure that no detainee is miscounted. Upon completing the first count, the officers shall change positions and count again.*
 - b. *The officers assigned the count shall have primary responsibility for the count accuracy, and shall be familiar with possible sources of error. The officers must know the specific manner of counting detainees in different types of locations (e.g., housing units, open-type areas, or work areas). A system for counting each detainee, including those who are outside the housing unit, shall be developed. The officers shall encourage detainees to accept the count as a facility necessity.*
 - c. *Prior to counting a detainee present, officers must make positive identification of the living body of the detainee and shall ascertain non-use of decoys (e.g., mannequins, replicas, dummies). Counting officers shall remain in the count area until the facility control center verifies and clears the count.*
 - d. *When making night counts, officers shall use flashlights judiciously, but with sufficient light to make a positive identification of a living body. The officer must not count a detainee based on a part or parts of clothing, hair, shoes, or the appearance of a human form.*
3. *Officers shall encourage detainee cooperation; however, they shall not allow detainees to perform the count, nor participate in the preparation or documentation of the count process.*
4. *There shall be no movement of detainees during formal counts. All detainee movements into, out of and within the facility must cease before the count begins. Detainee movement shall not resume anywhere in the facility until the complete facility count has been cleared. If, while conducting a count, staff observe an unusual incident (e.g., medical emergency, criminal act), they shall cease the count and respond appropriately according to local procedures. Should an emergency arise during the count that necessitates the movement of detainees, a new count shall be conducted as soon as possible after the emergency subsides.*
5. *All detainee units/areas shall be counted simultaneously. Each detainee shall be counted at a specific location, and all movement of detainees shall cease before the count begins. Movement shall not resume until the total detainee population count is verified and cleared. The counting officer from each location shall report his/her count to the facility control officer, who is responsible for collecting and maintaining the count.*
 - a. *After the count is reported, a signed paper count slip shall be delivered to the control center. This count slip shall be used to verify the area count.*
 - b. *Count slips must be prepared and signed in indelible ink. The control center shall not accept an improperly prepared count slip or*

one that contains erasures or alterations of any kind.

- c. Both officers conducting the count must sign the count slip.*
 - d. The control officer shall take into account the current out-count in verifying the population count against the master count.*
- 6. As each area reports its count, the control officer shall indicate that count in the control log.*
- a. If any area/unit reports an incorrect count, all areas/units shall be required to count again. If the count remains incorrect, the shift supervisor shall be notified and additional staff shall be dispatched to the count area to assist with a third count.*
 - b. No count shall be cleared until all counting errors have been corrected, or until the cause of error has been identified and corrective action taken.*
 - c. If a detainee is in the wrong count area, the detainee shall be escorted to the correct count area. If this occurs, officers in all count areas/units shall re-count, recall the earlier counts and deliver the new count slip to the control officer.*
- 7. If all recounts fail to clear the count, the shift supervisor shall conduct a face-to-photo count, matching photos on facility identification cards with detainee faces, individual by individual. When the face-to-photo count has been completed, the control officer shall report that count to the shift supervisor responsible for accepting and clearing the count.*
- 8. In the event that a detainee is unaccounted for after the face-to-photo count, the supervisor on duty shall institute the escape policy.*

B. Face-to-Photo Counts

Face-to-photo counts shall be conducted as necessary. Facilities shall conduct at least one face-to-

photo count daily.

Face-to-photo counting procedures are the same as the formal count procedures, except each detainee shall be matched with the photo on his/her I-385 card or facility equivalent photo-identification card.

C. Informal/Census Counts

Each officer shall make irregular, but frequent checks to verify the presence of all detainees in his/her charge.

These informal counts or checks occur between formal counts. For work crews, a count is made when the crew assembles for work, at frequent intervals during the work period and when the crew is dismissed at the end of the work period. An informal count is reported only if a detainee appears to be missing. In that case, an emergency (formal) count shall be taken.

D. Master Count

The facility control center shall maintain a master count.

The facility control officer maintains the master count record. He/she must be provided with up-to-the-minute information regarding detainee admissions, releases, housing changes, hospital admissions, outside work details and any other changes that may affect detainee accountability. An up-to-the-minute count record shall be maintained at all times in the control center. The master count shall take into account the current out-count.

E. Out-Counts

The control officer shall maintain an out-count record of the number and destination of all detainees who temporarily leave the facility.

This record must contain an accurate and up-to-the-minute listing of every temporary departure and return of a detainee. It must be updated regularly and used in any formal count.

F. Emergency Count

An emergency count shall be conducted when there is reason to believe a detainee is missing, or after a major disturbance has occurred.

An emergency count is a formal count taken in addition to, and at a different time, from the regularly scheduled formal counts. When a detainee is unaccounted for, or after a major disturbance has

ended, a count shall be taken to determine that no one has escaped or is in hiding. The facility control officer must always be prepared to produce an up-to-the-minute count for such use.

All detainees shall be returned to their housing units during emergency counts. An emergency count shall be conducted in the same manner as a formal count.

2.9 Post Orders

I. Purpose and Scope

This detention standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties and responsibilities of that post.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

For all types of facilities, procedures that appear in italics with a marked (**) on the page indicate optimum levels of compliance for this standard.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. Each officer shall have current written post orders that specifically apply to the assigned post, with step-by-step procedures written in sufficient detail to guide an officer assigned to that post for the first time.

2. Signed and dated records shall be maintained to show that assigned officers acknowledge that they have read and understood the post orders.
3. Post orders shall be formally reviewed annually, and updated as needed.

III. Standards Affected

This detention standard replaces “Post Orders” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-04.

ICE Interim Use of Force Policy (2004).

ICE Interim Firearms Policy (2004).

ICE/ERO *Performance-based National Detention Standards 2011*: “2.15 Use of Force and Restraints.”

V. Expected Practices

A. Post Orders Required

The facility administrator shall ensure that:

1. there are written post orders for each security post;
2. copies are available to all employees;
3. written facility policy and procedures exist, which:
 - a. provide official on-duty time for officers to read the applicable post orders when assigned to a post, and
 - b. ensure that officers read those applicable post orders prior to assuming their posts; and
4. as needed, post orders for non-permanent assignments (e.g., details, temporary housing units, emergencies) are developed in advance, or as soon as possible after the need arises.

B. Reading and Understanding of Post Orders

Officers and supervisors shall use the post orders to familiarize themselves with the duties for which they are responsible and to remain situationally aware of changes that occur in the operation and duties of that post. Even in the event that an officer has worked a post in the past, he/she shall assume the post orders have changed, and shall be required to read and comprehend all Post Order documents upon assuming their posts.

Supervisors shall ensure that officers understand the post orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.

C. Preparation of Post Orders

The chief security officer shall supervise the preparation of all post orders, which shall:

- 1. be based on ICE/ERO detention standards, ICE/ERO policies and facility practices and policies; and*
- 2. specifically state the duty hours for each post.*

The facility administrator (or designee) shall:

- 1. approve, sign and date each Post Order on the last page of each section;*
- 2. initial and date all other pages and*
- 3. initial and date any subsequent changes to the Post Order.*

D. Format of Post Orders

The post orders for each post shall be issued in a six-part classification folder and shall be organized as follows:

Section 1: Specific post orders, listing activities chronologically, with responsibilities clearly defined;

Section 2: Special instructions, if any, relating to the specific post;

Section 3: General post orders applicable to all posts;

Section 4: Memoranda changing or updating the post orders;

Section 5: ICE/ERO detention standards and policies and facility practices relevant to the post; and

Section 6: Review and signature form, dated and with the officer's name printed and signed.

E. Housing Unit Post Orders

In addition to the above requirements for all post orders, housing unit post orders shall follow the event schedule format (e.g., "0515—Lights on") and shall direct the assigned officer to maintain a unit log of pertinent information regarding detainee activity.

The shift supervisor shall visit each housing area and initial the log on each shift.

F. Armed and Perimeter-Access Post Assignments

In addition to the above requirements for all post orders, post orders for armed and perimeter-access post assignments shall describe and explain:

1. the proper care and safe handling of firearms; and
2. circumstances and conditions under which use of firearms is authorized.

Any officer assigned to an armed post must be qualified to use the firearms assigned to that post. With the exception of emergencies, armed employees shall be assigned only to transportation details, mobile patrols, or other posts inaccessible to detainees.

Post Orders for armed posts, and for posts that control access to the institution perimeter, shall clearly state that:

1. any staff member who is taken hostage is considered to be under duress; and
2. any order issued by such a person, regardless of his/her position of authority, is to be disregarded.

Specific instructions for escape attempts shall be included in the post orders for armed posts.

The post orders shall be based on and consistent with standard “2.15 Use of Force and Restraints” and the ICE/ERO Interim Use of Force Policy.

G. Maintenance of Post Orders

Post Orders shall be kept current at all times. Post orders shall be formally reviewed annually, at a minimum, and updated as needed. Should staff members become aware that any part of a folder containing post orders is out of date, or in need of repair or replacement, they shall immediately notify the shift supervisor.

1. Post Orders and logbooks are confidential and must be kept secure (under lock and key) at all times, and shall never be left in an area accessible to detainees.
2. The Chief of Security shall determine whether post orders require updates during any period between annual reviews. Any time the Chief of Security determines a page is too difficult to read, it shall be removed and replaced by a clean copy.
3. Two weeks before the annual review, supervisory staff shall solicit written suggestions for changes or additions to post orders from ICE/ERO staff,

contract staff and other affected staff.

The security supervisor or equivalent shall review and comment on all suggested changes prior to submitting them to the Chief of Security for review and possible inclusion in post orders. All submissions shall be retained in a historical file for two years.

The Chief of Security shall forward the updated post orders to the facility administrator for approval.

4. Emergency changes may be made by memorandum, and immediately placed in the post orders with an immediate notification made to the union, when required. During each review, post orders must be revised to incorporate or delete emergency changes, at which time any emergency memoranda are to be removed.
5. A post orders master file shall be maintained in the office of the Chief of Security, and shall be made available to all staff. Copies of the applicable post orders may be retained at the post, only if secure from detainee access.
6. The Chief of Security shall ensure that all post orders are transcribed on a computer and that all back-up disks are properly accounted for and maintained in a secure location.

2.10 Searches of Detainees

I. Purpose and Scope

This detention standard protects detainees and staff and enhances facility security and good order by detecting, controlling and properly disposing of contraband.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. Detainees shall live and work in a safe and orderly environment.
2. Contraband shall be controlled.
3. Cross-gender pat-down searches of male detainees shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required, or in other exigent circumstances.

Cross-gender pat-down searches of female detainees shall not be conducted unless in exigent circumstances. Staff of the same gender as the detainee should perform the strip search of the detainee. Searches of the detainee’s property, housing unit or other areas can be made by staff of either gender.

4. Searches of detainees, housing and work areas shall be conducted without unnecessary force and in ways that preserve the dignity of detainees.
5. When body searches are conducted, the least intrusive practicable search method shall be employed, as indicated by the type of contraband and the method of suspected introduction or concealment.
6. Pat searches of detainees and metal detector screening shall be conducted routinely to control contraband.
7. A strip search shall be conducted only when properly authorized by a supervisor and only in the event that there is reasonable suspicion that contraband may be concealed on the person, or when an officer has reasonable suspicion that a good opportunity for concealment has occurred or as may be outlined in facility procedures for post contact visits as indicated in standard “5.7 Visitation.”
8. A body cavity search shall be conducted by designated health personnel only when authorized by the facility administrator on the basis of reasonable suspicion that contraband may be concealed in or on the detainee’s person.
9. “Dry cells” shall be used for contraband detection, with proper authorization and in accordance with required procedures, only when there is reasonable suspicion of concealment.
10. Contraband that may be evidence in connection with a violation of a criminal statute shall be preserved, inventoried, controlled and stored so as to maintain and document the chain of

custody.

11. Canine units (in facilities that have them) may be used for contraband detection when detainees are not present, but canine use for force, intimidation, control, or searches of detainees is prohibited.
12. As needed and on an individualized basis, the facility shall provide reasonable accommodations, and modify its policies, practices, or procedures relating to pat, strip, and body cavity searches of detainees with disabilities.
13. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Searches of

Detainees” dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2C-01, 2C-02, 2C-03, 2C-04, 2C-05, 2C-06, 2A-20, 6C-19.

Notice Admission and Release—National detention standard Strip Search Policy (10/15/2007).

This detention standard incorporates the restrictions on the use of canines originally communicated via a memorandum on ICE use of canines in support of ICE detention operations dated 11/18/2004 from the Acting Director of Enforcement and Removal Operations.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.1 Admission and Release”;
- “2.3 Contraband”;
- “2.6 Hold Rooms in Detention Facilities”;
- “2.12 Special Management Units”; and
- “5.7 Visitation.”

“*Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities*,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Written Policy and Procedures Required

All facilities shall have written policy and procedures consistent with this standard for the following:

1. searches of detainee housing and work areas;
2. body searches, including pat searches (“pat downs”), strip searches, body cavity searches and x-rays;
3. close observation in “dry cells” to detect

contraband;

4. employing the least intrusive method of search practicable, as indicated by the type of suspected contraband and the method of suspected introduction or concealment;
5. avoiding unnecessary force during searches and preserving the dignity of the detainee being searched;
6. leaving a searched housing or work area and detainee's property in its original order, to the extent practicable;
7. handling of contraband;
8. use of canine units (in facilities that have them);
9. preservation of evidence; and
10. administration of medical treatment during "lock-downs."

B. Staff Training

All staff who conduct searches of housing, work areas or of a detainee's body shall receive initial training regarding search procedures prior to entering on duty, and shall receive annual training in authorized and effective techniques thereafter.

C. Search of Detainee Housing and Work Areas

Staff may search a detainee's housing and work area, and personal items contained within those areas, without notice to, or approval from, the detainee and in the detainee's absence.

Each facility shall establish procedures to ensure all housing units and work areas are searched routinely, but irregularly, as such inspections are primarily intended to:

1. detect and deter the introduction of contraband;
2. prevent escapes;
3. maintain sanitary standards; and
4. eliminate fire and safety hazards.

Staff shall maintain written documentation of each housing-unit search within the individual housing unit. Work areas shall be searched each workday by shop supervisors, and these inspections shall be supplemented with periodic searches by designated search teams. When property is taken during a housing search, a receipt shall be given to the detainee. The Chief of Security shall maintain documentation of search-team inspections.

Facilities shall have written procedures to provide for basic detention services (e.g., delivery of food services, toilet access, medication delivery) during lockdowns.

D. Body Searches of Detainees

1. Pat Search

a. Description

A pat search (or "pat down") is a sliding or patting of the hands over the clothed body of a detainee by staff to determine whether the individual possesses contraband.

A pat search does not require the detainee to remove clothing, although the inspection includes a search of the detainee's clothing and personal effects.

A hand-held and/or stationary metal detector, when available, may be used in conjunction with a pat search.

Staff shall conduct a pat search of a detainee on a routine or random basis to control contraband without a threshold level of suspicion.

All pat searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs, including consideration of officer safety.

Security staff shall be trained in proper procedures for conducting pat searches, including cross-gender pat searches and searches of transgender and intersex detainees.

b. Gender of Officer

Cross-gender pat-down searches of male detainees shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required, or in exigent circumstances. Cross-gender pat-down searches of female detainees shall not be conducted unless in exigent circumstances.

All cross-gender pat-down searches shall be documented.

2. Strip search

a. Description

A strip search is a search that requires a person to remove or arrange some or all clothing so as to permit a visual inspection of the person's breasts, buttocks, or genitalia. Staff shall not routinely require a detainee to remove clothing or require a detainee to expose private parts of his/her body to search for contraband. To the extent reasonably possible, the inspector shall refrain from touching the skin surface of the detainee; however, the inspector may request that the detainee move parts of the body to permit visual inspection. A strip search is considered more intrusive than a pat search, and shall be conducted in a manner designed to ensure as much privacy to the detainee as practicable.

A strip search requires the removal or rearrangement of some or all of the detainee's clothing to examine the clothing and/or to permit the inspection of exterior skin surfaces of the body, including breasts and exterior anal and genital areas, as well as inside of the nose, ears and mouth. If items are discovered that protrude from a body cavity, the removal of those items is governed by the procedures applicable to body-cavity searches, addressed below.

The facility shall not search or physically examine a detainee for the sole purpose of determining the detainee's genital characteristics. If the detainee's

gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, learning that information as part of a standard medical examination that all detainees must undergo as part of intake or other processing procedure conducted in private, by a medical practitioner.

All strip searches shall be documented.

Except in cases where strip searches are performed in accordance with a facility's post contact visitation procedure, whenever a strip search is conducted, the articulable facts supporting the conclusion that reasonable suspicion exists shall be documented on Form G-1025 (Record of Search) or the equivalent.

Unless there is specific and articulable suspicion that contraband has been transferred to a detainee, detainees shall not be subjected to a strip search after a visit by a consular representative, an attorney, a legal assistant working under the supervision of an attorney, or an accredited representative. Policy regarding post contact visitation searches can be found in "V. Expected Practices" of standard "5.7 Visitation."

b. Reasonable Suspicion

Officers must obtain supervisory approval before conducting strip searches. Staff may conduct a strip search where there is reasonable suspicion that contraband may be concealed on the person. "Reasonable suspicion" means suspicion based on specific and articulable facts that would lead a reasonable officer to believe that a specific detainee is in possession of contraband. It is a more permissive (lower) standard than probable cause, but it is more than a mere hunch. It must be based on specific and articulable facts—along with reasonable inferences that may be drawn from those facts—that the officer shall document in Form G-1025 or equivalent.

Reasonable suspicion is determined under the

totality of the circumstances. There is no simple, exact, or mathematical formula for reasonable suspicion. It may be based on one, or a combination, of the following factors:

- 1) observation of unusual, surreptitious, or suspicious appearance or behavior;
- 2) evasive or inconsistent responses to questions by law enforcement officers;
- 3) discovery of a weapon or other contraband during a pat search, metal detector scan, or other non-intrusive search;
- 4) the detainee's criminal history, particularly prior felony or misdemeanor for convictions of crimes involving violence, weapons, contraband, or illegal substances (convictions for minor or non-violent offenses shall not be the only basis for reasonable suspicion);
- 5) whether the detainee was detained concurrently with an arrest for a crime of violence; or whether the detainee was arrested in possession of a weapon, or in possession of contraband such as illegal drugs;
- 6) information from law enforcement databases or from other reliable sources suggesting that the detainee has affiliations with terrorist organizations, criminal gangs, or organized crime; or
- 7) the detainee's history during confinement, particularly of violence, or of possession of contraband.

The lack of identity documents alone does not ordinarily constitute reasonable suspicion.

Before strip-searching a detainee to search for contraband, an officer shall first attempt to resolve his/her suspicions through less intrusive means, such as a thorough examination of reasonably available ICE, CBP and other law enforcement records; a pat-down search; a detainee interview; or (where available) the use

of a magnetometer or Boss chair. The officer shall document the results of those other, less intrusive, search methods on Form G-1025 or equivalent.

In accordance with standard "5.7 Visitation," facilities may not adopt policies permitting strip searches after contact visits in the absence of reasonable suspicion unless detainees are provided the right to choose non-contact visitation instead of contact visitation and are fully informed of such right. Consistent with standard "5.7 Visitation," any such policies must be communicated to detainees in a language or manner that they understand.

c. Gender of Officer

An officer of the same gender as the detainee shall perform the search. Special care should be taken to ensure that transgender detainees are searched in private.

In the case of an emergency, a staff member of the same gender as the detainee shall be present to observe a strip search performed by an officer of the opposite gender.

When an officer of the opposite gender conducts a strip search which is observed by a staff member of the same gender as the detainee, staff shall document the reasons for the opposite-gender search in any logs used to record searches and in the detainee's detention file.

3. Body-cavity Searches

A body-cavity search is an inspection for contraband or any other foreign item, in a body cavity of a detainee, by use of fingers or simple instruments, such as an otoscope, tongue blade, short nasal speculum and simple forceps. A body-cavity search is considered the most intrusive type of search. A body cavity search must be performed by a medical professional and take place in an area that affords privacy from other detainees and from facility staff who are not involved in the search.

Before proceeding in cases of drawing blood for toxicology studies and DNA testing, written, informed consent must be granted by the detainee and recorded in the detainee's medical records before the blood sample is drawn (see also standard "4.3 Medical Care"). Requests for forensic studies shall be referred to the medical facility health services administrator (HSA) who is authorized to facilitate arrangement for these services off-site.

- a. A body-cavity search may only be conducted by authorized medical personnel, upon approval of the facility administrator or acting facility administrator, and only if that person has reasonable suspicion that contraband may be concealed in or on the detainee's person.
- b. The articulable facts supporting the conclusion that reasonable suspicion exists shall be documented.
- c. A body-cavity search may be advisable to protect the health and safety of a detainee.
- d. Only designated qualified health personnel (for example, physicians, physician assistants and nurses) may conduct a digital or simple instrument search in a licensed medical setting.
- e. The detainee's health and welfare shall be considered prior to performance of any digital or simple instrument search.
- f. Although a detainee's written consent should be obtained prior to conducting a digital or simple instrument search, such written consent is not required.
- g. Whenever possible, transgender detainees shall be permitted to choose the gender of the staff member conducting a body-cavity search.
- h. Staff, other than the designated qualified health personnel, of the opposite gender from the detainee may not observe a body cavity search.
- i. If located, the contraband or foreign item may be removed immediately by medical staff, if such

removal can easily be effected by use of fingers or simple medical instruments.

- j. IHSC staff is not authorized to collect or participate in the collection of specimens or other information that shall be used for forensic purposes, except for toxicology studies, rape kits and DNA testing.

Staff shall document all body cavity, digital, and simple instrument searches, the authorizations and the reasons for the searches in any logs used to record searches and in the detainee's detention file.

E. Close Observation in a "Dry Cell"

1. Description and Authorization

When an officer has reasonable suspicion to believe that a detainee may have ingested contraband or concealed contraband in a body cavity, and the methods of search specified above are inappropriate or likely to result in physical injury to the detainee, the facility administrator or designee may authorize that the detainee be placed in a room or cell to be closely observed by staff until the detainee has voided or passed the contraband or until sufficient time has elapsed to preclude the possibility that the detainee is concealing contraband.

Such placement is commonly referred to as "dry cell" status, which may be approved:

- a. during regular duty hours by the facility administrator or designee, or
- b. at other times by the shift supervisor.

2. Requirements for "Dry Cells"

It is recommended that one or more rooms or cells be identified as dry cells; such rooms must meet the following requirements:

- a. The room shall be free of hiding places and be equipped with only a bed.
- b. Doors shall have proper observation panels to protect staff and to allow unobstructed observation.

- c. Windows in the dry cell shall have a security screen to prevent loss of contraband.
- d. If the designated area is equipped with a toilet and/or sink, the water to the cell shall be shut off for the duration of the dry cell process and the toilet and sink removed prior to the detainee being allowed into the room.
- e. Prior to a detainee's placement in dry cell status, the room to be used shall be completely searched and determined to be free of contraband. Potential hiding places, if any, for contraband shall be noted

3. Advising the Detainee

The supervisor responsible for initiating the close observation watch shall advise the detainee of the conditions and what is expected, and shall document the notification on an Administrative Segregation Order. The detainee shall be advised of the reasons he/she is being placed in a dry cell, the purpose of this placement, the conditions he/she can expect and the means by which he/she can request items and services including, but not limited to, food and water, medical care, hygiene products and bedpans.

4. Conditions of "Dry Cell" Status

- a. For the detainee's safety, he/she shall be required to provide a urine sample within two hours of placement under close observation. A second urine sample shall be required prior to releasing the detainee from close observation.
- b. The light shall be kept on at all times.
- c. The detainee shall have regular access to potable water.
- d. The detainee shall be provided telephone access.
- e. The detainee may not be allowed to come in contact with another detainee.
- f. Ordinarily, the detainee may not be allowed personal property, except legal and personal mail and a reasonable amount of legal materials.

- g. Personal hygiene items shall be controlled by staff. When the detainee requests to shave, brush teeth, or perform other toiletry tasks, a wash pan and container of water shall be provided for use in the cell.
- h. When the detainee is lying on a bed, the detainee shall be required to lie on top of the mattress in full view, weather and room temperature permitting. When necessary for the detainee to use cover, hands must remain visible at all times so that staff can observe any attempt to move contraband.
- i. Because a detainee might attempt to remove and/or insert contraband from or into a body cavity, staff must observe the detainee's hands at all times.
- j. The detainee shall not be permitted to leave the cell or room, except in case of extreme emergency.
- k. The detainee shall be served the same meals as the general population, unless medically advised. All meals are to be inspected for contraband prior to delivery to the detainee, and any food remaining after the meal, as well as the utensils and tray, are to be thoroughly inspected before their return to food service.
- l. Only medications prescribed and administered directly to the detainee by medical personnel may be given to the detainee. No laxatives may be given, except natural ones (e.g., coffee, prune juice).
- m. When the detainee needs to urinate and/or defecate, he/she shall be furnished an empty hospital bedpan, which shall afterward be closely inspected to ascertain whether any contraband is present.
- n. Since the detainee is in administrative segregation status even if not actually housed in the Special Management Unit (SMU), the requirements for medical and supervisory and staff visits in

standard “2.12 Special Management Units” apply.

- o. Dry cells must be cleaned in accordance with standard “1.2 Environmental Health and Safety.”

5. Post Orders

The Chief of Security shall have post orders for closely observing a detainee in dry cell status. A video camera shall be used whenever possible and as appropriate.

6. Requirements for Close Observation

The detainee shall be constantly observed and supervised by a staff member of the same gender.

It is the observer’s responsibility to ensure the detainee does not dispose of any concealed item, and to prevent activity which would allow the detainee access to it, thereby jeopardizing the security and good order of the facility, staff and detainees. Any questions, emergency, or other situation that arises shall immediately be brought to the attention of the shift supervisor.

Under no circumstances shall the detainee be allowed freedom to move around unsupervised, or be given an opportunity to dispose of any objects he/she may be concealing.

- a. The observing staff member shall be issued a portable radio or telephone and flashlight, so that he/she does not have to interrupt constant observation to communicate with other staff (such as for watch calls).
- b. Detainees shall be monitored by medical staff for changes in medical and mental health status.
- c. A daily log and SMU record shall be maintained on each detainee in dry cell status.
- d. The shift supervisor shall ensure observers have reviewed the post orders.
- e. The shift supervisor shall provide periodic staff relief to the observer and at any other time the observer must leave the area. The detainee must not be left unattended.

- f. Trash may not be allowed to accumulate, and each item shall be thoroughly searched before final disposal.

- g. Periodic searches shall be conducted as follows:

- 1) a strip search of the detainee when he/she is placed in the dry cell after which the detainee shall be issued a jump suit (or other suitable loose-fitting clothing);
- 2) a strip search of the detainee at least once each shift, if necessary; and
- 3) a search of the dry cell at least once each shift.

Searches shall be conducted so as not to reveal to the detainee a predictable pattern. Prior to each search, the shift supervisor must be notified and a second staff member provided to ensure continual close observation and supervision of the detainee. Each search must be documented on Form G-1025 or equivalent.

- h. Staff shall notify the shift supervisor when contraband is found, secure the contraband in a properly documented evidence bag, and maintain the chain of evidence.

7. Length of Observation

The length of close-observation status must be determined on an individual basis. Ordinarily, the Chief of Security during regular work hours or the shift supervisor, at other times, in consultation with qualified health personnel, shall determine when termination is appropriate.

- a. Three Days

The status of a detainee under close observation for as long as three days must be reviewed by medical staff and the administrative segregation review official in accordance with standard “2.12 Special Management Units” (irrespective of whether the observation actually occurs in the SMU).

- b. Seven Days

Since it is unlikely that the objective of dry cell

status will not be achieved within seven days, maintaining a detainee under close observation beyond seven days requires prior approval of the facility administrator and medical staff.

F. X-Ray

1. Medical

The facility physician may authorize use of an x-ray for medical reasons and only with the consent of the detainee.

2. Security

Only the facility administrator, upon approval by the respective Field Office Director (or persons officially acting in that capacity) may authorize the facility physician to order a non-repetitive x-ray examination for the purpose of determining whether contraband is concealed in or on the detainee (for example: in a cast or body cavity).

Such approval and authorization shall be based on the facility administrator and physician's determination that:

- a. An x-ray examination is necessary for the security, safety, good order, or discipline of the facility;
- b. No reasonable alternative exists; and
- c. The examination is not likely to result in serious or lasting medical injury or harm to the detainee, based on the determination of qualified medical staff.

Staff shall place documentation of the examination, the authorizations and the reasons for the examination in the detainee's detention file and medical file.

An x-ray examination may not be performed on a detainee without the detainee's consent. Staff shall solicit the detainee's consent and cooperation prior to the x-ray examination. Force may not be used to gain consent and cooperation. If the detainee does not provide consent and fails to cooperate, x-ray examination should not be performed

3. Objects

The facility administrator may direct x-rays of inanimate objects where the detainee is not exposed.

G. Major Instrument, Fluoroscope, or Surgical Intrusion

Only a physician may authorize use of a fluoroscope, major instrument (including anoscope or vaginal speculum), or surgical intrusion for medical reasons only and only with the detainee's consent.

H. Preservation of Evidence

Contraband that may be evidence in connection with a violation of a criminal statute shall be preserved, inventoried, controlled and stored so as to maintain and document the chain of custody, and shall be reported to the appropriate law enforcement authority for action and possible seizure and prosecution.

2.11 Sexual Abuse and Assault Prevention and Intervention

I. Purpose and Scope

This detention standard requires that facilities that house ICE/ERO detainees act affirmatively to prevent sexual abuse and assaults on detainees; provide prompt and effective intervention and treatment for victims of sexual abuse and assault; and control, discipline and prosecute the perpetrators of sexual abuse and assault.

This detention standard applies to the following types of facilities housing ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs).

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

Specific requirements are defined in “V. Expected Practices.” The expected outcomes of this detention standard are as follows:

1. The facility shall articulate and adhere to a written zero tolerance policy for sexual abuse or assault, outlining the facility’s approach to preventing, detecting, and responding to such conduct.
2. A designated Prevention of Sexual Assault Compliance Manager (PSA Compliance Manager) will assist in ensuring facility compliance with sexual abuse and assault prevention and intervention policies and procedures.
3. Staff shall receive training on their responsibilities under the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
4. Detainees shall be informed about the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
5. The facility will take appropriate steps to ensure that detainees with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
6. The facility will utilize available community resources to provide victim services and other appropriate support to the fullest extent possible following incidents of sexual abuse or assault.
7. Staff shall be alert to potential risks or signs of sexual abuse or assault, and take appropriate action to mitigate any identified risks or protect a detainee as necessary.
8. Detainees shall be screened upon intake for risk of sexual victimization or abusiveness, and housed accordingly.
9. The facility will use a coordinated, multidisciplinary team approach to effectively respond to all incidents of sexual abuse or assault and address any safety, medical, or mental health needs.
10. Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or assault, retaliation against individuals who reported an incident,

or any staff neglect or violation of responsibilities which may have contributed to an incident or retaliation.

11. All allegations of sexual abuse or assault shall be immediately reported to ICE/ERO, and any other required entities based on the nature of the allegation.
12. Alleged victims shall be promptly referred for medical or mental health services, as appropriate, and receive any necessary emergency or ongoing care related to the incident.
13. Staff suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of the investigation.
14. The facility shall ensure that each allegation of sexual abuse or assault is investigated by an appropriate criminal or administrative investigative entity, and shall cooperate with all investigative efforts to ensure a thorough and objective investigation.
15. Staff or detainee perpetrators will be appropriately disciplined for any confirmed acts of sexual abuse or assault.
16. The facility shall conduct a review following every investigation of sexual abuse or assault, and on an annual basis, to assess whether changes to facility policy or practice could better prevent, detect, or respond to sexual abuse and assault.
17. The facility shall maintain all records associated with incidents of sexual abuse or assault in appropriately secure files and locations.
18. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the

provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Sexual Abuse and Assault Prevention and Intervention” dated 12/2/2008.

IV. References

National Commission on Correctional Health Care, *Standards for Health Services in Jails (2014)*.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.1 Admission and Release”;
- “2.2 Custody Classification System”;
- “2.4 Facility Security and Control”;
- “2.6 Hold Rooms in Detention Facilities”;
- “2.10 Searches of Detainees”;
- “2.12 Special Management Units”;
- “3.1 Disciplinary System”;

“4.3 Medical Care”;
 “4.4 Medical Care (Women)”;
 “4.5 Personal Hygiene”;
 “6.2 Grievance System”; and
 “7.1 Detention Files”.

“Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Written Policy and Procedures Required

Each facility’s policy and procedures shall reflect the unique characteristics of each facility, based on factors such as the availability of specialized community-based services, including rape crisis/trauma units in local medical centers, clinics and hospitals.

Each facility shall have written policy and procedures for a Sexual Abuse or Assault Prevention and Intervention Program. This policy must mandate zero tolerance toward all forms of sexual abuse or assault, outline the facility’s approach to preventing, detecting, and responding to such conduct and include, at a minimum:

1. procedures on preventing sexual abuse and assault, including:
 - a) procedures for assessing all detainees for their risk of sexual abusiveness or victimization;
 - b) procedures for housing detainees in accordance with their classification assessment;
 - c) training of all employees, contractors, and volunteers on the agency’s and facility’s zero tolerance policies and their responsibilities under those policies; and
 - d) notification to detainees of the facility’s Sexual Abuse and Assault Prevention and Intervention Program.
2. procedures for immediate reporting of sexual abuse allegations, including:
 - a) procedures for immediate reporting of sexual abuse allegations through the facility’s chain of command, from the reporting official to the highest facility official as well as the Field Office Director, as well as a method by which staff can report outside the chain of command;
 - b) responsibility of all staff to report allegations or suspicions of sexual assault;
 - c) referrals to law enforcement agencies;
 - d) written documentation requirements to ensure that each allegation or suspicion is properly reported and addressed;
 - e) a method to receive third-party reports of sexual abuse in its facility, with information made available to the public regarding how to report sexual abuse on behalf of a detainee.
3. procedures for prompt and effective intervention to address the safety and treatment needs of detainee victims if an alleged assault occurs, including:
 - a) procedures for offering immediate protection, including prevention of retaliation and medical and mental health referrals;
 - b) plan to coordinate actions taken by staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse;
 - c) methods for addressing the alleged victim’s future safety, medical, and mental health needs;
4. procedures to include victim advocate services in sexual abuse or assault prevention and intervention programs, if such resources are available;
5. procedures for investigation and discipline of

assailants, including:

- a) coordinating with ICE and other appropriate investigative agencies to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse;
 - b) following a uniform evidence protocol, including access to a forensic medical exam, which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions;
 - c) procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with the ICE Office of Professional Responsibility (OPR);
 - d) disciplinary sanctions for staff, up to and including termination when there is a substantiated allegation of sexual abuse, or when staff has violated agency sexual abuse policies
6. procedures for data collection and reporting; and the facility's requirement to cooperate with all ICE audits and monitoring of facility compliance with sexual abuse and assault policies and standards.

"Appendix 2.11.A: Sample Sexual Abuse Prevention and Intervention Protocols" in this standard offers sample protocols as guidelines for the development of written policies and procedures.

The facility's written policy and procedures require the review and approval of the Field Office Director.

The facility administrator shall ensure that, within 90 days of the adoption of this detention standard, written policy and procedures are in place and that the facility is in full compliance with its requirements and guidelines. The facility must meet all other requirements in this standard on the date the standard is adopted.

Each facility shall also post its protocols on its website, if it has one, or otherwise make the protocol

available to the public.

B. Acts of Sexual Abuse and/or Assault

For the purposes of this standard, the following definitions apply:

1. Detainee-on-detainee Sexual Abuse and/or Assault

Sexual abuse of a detainee by another detainee includes any of the following acts by one or more detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- a. contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. contact between the mouth and the penis, vagina or anus;
- c. penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- d. touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- e. threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

2. Staff-on-detainee Sexual Abuse and/or Assault

Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- a. contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. contact between the mouth and the penis, vagina or anus;
- c. penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- d. intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- f. repeated verbal statements or comments of a sexual nature to a detainee;
- g. any display of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, or;
- h. voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism: staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring an inmate detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing bodily functions.

C. Compliance Manager

The facility administrator shall designate a Prevention of Sexual Assault Compliance Manager (PSA Compliance Manager) who shall serve as the facility point of contact for the ICE PSA Coordinator and who has sufficient time and authority to oversee facility efforts to comply with facility sexual abuse prevention and intervention policies and procedures. The Compliance Manager shall:

1. assist with the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention Program, as specified above in this standard, and with keeping them current;
2. assist with the development of initial and ongoing training protocols;
3. serve as a liaison with other agencies;
4. coordinate the gathering of statistics and reports on incidents of sexual abuse or assault, as detailed in "O. Data Collection" in this standard;
5. review the results of every investigation of sexual abuse and assist in conducting an annual review of all investigations in compliance with the Privacy Act to assess and improve prevention and response efforts; and
6. review facility practices to ensure required levels of confidentiality are maintained.

D. Sexual Conduct between Detainees Prohibited

In addition to the forms of sexual abuse and/or assault defined above, all other sexual conduct – including consensual sexual conduct – between detainees is prohibited and subject to disciplinary sanctions. However, staff should be sensitive to the possibility that seemingly consensual behavior may have involved coercion by either person involved.

Consensual sexual conduct between detainees and staff, volunteers, or contract personnel is included within the definition of staff-on-detainee sexual abuse and/or assault above.

E. Staff Training

Training on the facility's Sexual Abuse or Assault Prevention and Intervention Program shall be included in training for all employees, and shall also be included in annual refresher training thereafter.

Employee training shall ensure facility staff are able to fulfill their responsibilities under this standard, and shall include:

1. The facility's zero-tolerance policies for all forms of sexual abuse;
2. definitions and examples of prohibited and illegal sexual behavior;
3. the right of detainees and staff to be free from sexual abuse, and from retaliation for reporting sexual abuse;
4. instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
5. recognition of situations where sexual abuse and/or assault may occur;
6. how to avoid inappropriate relationships with detainees;
7. working with vulnerable populations and addressing their potential vulnerability in the general population;
8. recognition of the physical, behavioral and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences;
9. the requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes;
10. the investigation process and how to ensure that evidence is not destroyed;
11. prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or

physical disabilities;

12. how to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
13. instruction on reporting knowledge or suspicion of sexual abuse and/or assault; and
14. instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and/or assault.

The facility shall ensure that all volunteers and other contractors who have contact with detainees have been trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of the facility's zero-tolerance policy and informed how to report such incidents. In this paragraph "other contractor" means a person who provides services on a non-recurring basis to the facility pursuant to a contractual agreement with the agency or facility.

The facility must maintain written documentation verifying employee, volunteer and contractor training. In addition to the general training provided to all facility employees, the facility shall provide specialized training on sexual abuse and effective cross-agency coordination to facility investigators who conduct investigations into allegations of sexual abuse at immigration detention facilities. This training must cover, at a minimum, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or prosecutorial referral, and information about effective cross-agency coordination in the investigation process. The facility must maintain written documentation

verifying specialized training provided to investigators pursuant to this paragraph.

Facility medical staff shall be trained in procedures for examining and treating victims of sexual abuse, in facilities where medical staff may be assigned these activities. This training shall be subject to the review and approval of the Field Office Director or other designated ICE official.

F. Detainee Notification, Orientation and Instruction

The facility administrator shall ensure that the orientation program, required by standard “2.1 Admission and Release,” and the detainee handbook required by standard “6.1 Detainee Handbook,” notify and inform detainees about the agency’s and the facility’s zero tolerance policies for all forms of sexual abuse and assault.

Following the intake process, the facility shall provide instruction to detainees on the facility’s Sexual Abuse and Assault Prevention and Intervention Program and ensure that such instruction includes (at a minimum):

1. the facility’s zero-tolerance policy for all forms of sexual abuse or assault;
2. prevention and intervention strategies;
3. definitions and examples of detainee-on-detainee sexual abuse, staff-on-detainee sexual abuse and coercive sexual activity;
4. explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the Detention and Reporting Information Line (DRIL), the DHS/OIG and the ICE/OPR investigation processes;
5. information about self-protection and indicators of sexual abuse;
6. prohibition against retaliation, including an explanation that reporting an assault shall not

negatively impact the detainee’s immigration proceedings; and

7. right of a detainee who has been subjected to sexual abuse to receive treatment and counseling.

Detainee notification, orientation and instruction must be in a language or manner that the detainee understands, including for those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to detainees who have limited reading skills. The facility shall maintain documentation of detainee participation in the instruction session.

The facility shall develop policies and procedures to ensure that detainees have multiple ways to privately report sexual abuse, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to such incidents:

1. Each facility’s sexual abuse or assault prevention and intervention program shall provide detainees who are victims of sexual abuse or assault the option to report the incident or situation to a designated staff member other than an immediate point-of-contact line officer (e.g., the program coordinator or a mental health specialist). The facility shall provide detainees with the name of the program coordinator or designated staff member and information on how to contact him or her. Detainees will also be informed that they can report any incident or situation regarding sexual abuse, assault or intimidation to any staff member (as outlined above), the DHS Office of Inspector General, and the Joint Intake Center.
2. The facility shall provide instructions on how detainees may contact their consular official, the DHS Office of Inspector General, or as appropriate, another designated office, to confidentially and, if desired, anonymously report these incidents.
3. The facility shall inform the detainees of at least one way for detainees to report sexual abuse to a public or private entity or office that is not part of

the agency, and that is able to receive and immediately forward detainee reports of sexual abuse to agency officials, allowing the detainee to remain anonymous upon request. As cited earlier under “III. Standards Affected,” ICE/ERO has provided a sexual assault awareness notice to be posted on all housing-unit bulletin boards, as well as a “Sexual Assault Awareness Information” pamphlet to be distributed (see “Appendix 2.11.B: Sexual Abuse and Assault Awareness Brochure” in this standard). The facility shall post with this notice the name of the PSA Compliance Manager and information about local organizations that can assist detainees who have been victims of sexual assault, including mailing addresses and telephone numbers (including toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations. This information will be provided in English and Spanish, and to other segments of the detainee population with limited English proficiency, through translations or oral interpretation.

G. Accommodating Detainees with Disabilities or Limited English Proficiency

Each facility shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility’s efforts to prevent, detect, and respond to sexual abuse. Such steps shall include, when necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision,

a) providing access to in-person, telephonic, or

video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.

b) providing access to written materials related to sexual abuse in formats or through methods that ensure effective communication.

Each facility shall take steps to ensure meaningful access to all aspects of the facility’s efforts to prevent, detect, and respond to sexual abuse to detainees who are limited English proficient, including steps to provide in-person or telephonic interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.

In matters relating to allegations of sexual abuse, each facility shall employ effective expressive and receptive verbal communication techniques while communicating with detainees with disabilities in accordance with professionally accepted standards of care. Each facility shall provide detainees with disabilities and detainees with Limited English Proficiency with in-person or telephonic interpretation services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and the agency determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse.

Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for other significant segments of the population with limited English proficiency. Oral

interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

H. Victim Advocate Services

Each facility shall utilize available community resources and services to provide valuable expertise and support in the areas of crisis intervention, counseling, investigation and the prosecution of sexual abuse perpetrators to most appropriately address victims' needs. Each facility administrator shall establish procedures to make available, to the full extent possible, outside victim services following incidents of sexual abuse. The facility shall also attempt to make available such victim services for any individuals identified as having experienced sexual victimization prior to entering DHS custody.

The facility administrator shall maintain or attempt to enter into memoranda of understanding (MOU) or other agreements with community service providers or, if local providers are not available, with national organizations that provide legal advocacy and confidential emotional support services for immigrant victims of crime. The facility shall enable reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. The facility shall also inform detainees, prior to giving them access to outside resources, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

I. Prevention

All staff and detainees are responsible for being alert to signs of potential situations in which sexual assaults might occur, and for making reports and intervention referrals as appropriate. If a facility staff member has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual

abuse, he or she shall take immediate action to protect the detainee.

1. Classification and Screening

In accordance with standards "2.1 Admission and Release" and "2.2 Custody Classification System", the facility shall assess all detainees on intake to identify those likely to be sexual aggressors or sexual abuse victims and shall house detainees to prevent sexual abuse, taking necessary steps to mitigate any such danger. The facility shall also use the information to inform assignment of detainees to recreation and other activities, and voluntary work.

Each new arrival shall be kept separate from the general population until he/she is classified and may be housed accordingly.

The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization:

- (a) Whether the detainee has a mental, physical, or developmental disability;
- (b) The age of the detainee;
- (c) The physical build and appearance of the detainee;
- (d) Whether the detainee has previously been incarcerated or detained;
- (e) The nature of the detainee's criminal history;
- (f) Whether the detainee has any convictions for sex offenses against an adult or child;
- (g) Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (h) Whether the detainee has self-identified as having previously experienced sexual victimization; and
- (i) The detainee's own concerns about his or her physical safety. The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional

violence or sexual abuse, as known to the facility, in assessing detainees for risk of being sexually abusive.

Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to items (a), (g), (h), or (i) above. The facility shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this screening in order to ensure that sensitive information is not exploited to the detainee's detriment by staff or other detainees or inmates. Detainees who are considered at risk shall be placed in the least restrictive housing that is available and appropriate. Such detainees should be assigned to administrative segregation for protective custody only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

2. Transportation

Detainees identified as being "at risk" for sexual victimization shall be transported in accordance with that special safety concern. The section on "Count, Identification and Seating," found in standard "1.3 Transportation (by Land)," requires that transportation staff seat each detainee in accordance with written procedures from the facility administrator, with particular attention to detainees who may need to be afforded closer observation for their own safety.

3. Upgrades to Facilities and Technologies

When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification upon its ability to protect detainees from sexual abuse.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology in a facility, the facility shall

consider how such technology may enhance its ability to protect detainees from sexual abuse.

J. Prompt and Effective Intervention

Staff sensitivity toward detainees who are victims of sexual abuse and/or assault is critical.

Staff shall take seriously all statements from detainees claiming to be victims of sexual assaults, and shall respond supportively and non-judgmentally. Any detainee who alleges that he/she has been sexually assaulted shall be offered immediate protection and separation from the assailant and shall be referred for a medical examination and/or clinical assessment for potential negative symptoms. Staff members who become aware of an alleged assault shall immediately follow the reporting requirements set forth in the written policies and procedures.

If a victim is transferred between detention facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services (unless, in the case of transfer to a non-ICE facility, the victim requests otherwise). If the receiving facility is unknown to the sending facility, the sending facility shall notify the Field Office Director, so that he or she can notify the receiving facility.

Facilities should use a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which in accordance with community practices, includes a medical practitioner, a mental health practitioner, a security staff member and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise. The facility shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, ICE will provide these services by making available a qualified staff member from a community-based organization, or a qualified agency staff member. A qualified agency

staff member or a qualified community-based staff member means an individual who has received education concerning sexual assault and forensic examination issues in general. The outside or internal victim advocate shall provide emotional support, crisis intervention, information, and referrals.

Care shall be taken to place the detainee in a supportive environment that represents the least restrictive housing option possible (e.g. in a different housing unit, transfer to another facility, medical housing, or protective custody), and that takes into account any ongoing medical and mental health needs of the alleged victim.

Victims shall not be held for longer than five days in any type of administrative segregation, except in highly unusual circumstances or at the request of the detainee. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a proper re-assessment, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse.

Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the facility, the facility shall comply with all applicable response and intervention requirements in this standard, as appropriate based on the nature and status of the case.

K. Protection Against Retaliation

Staff, contractors, volunteers, and detainees shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force.

The facility shall employ multiple protection measures, such as housing changes, removal of alleged staff or detainee abusers from contact with

victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, the facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include any detainee disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

L. Reporting, Notifications and Confidentiality

Each facility shall require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse that occurred in a facility; retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Staff members who become aware of alleged sexual abuse shall immediately follow the reporting requirements set forth in the facility's written policies and procedures.

Apart from such reporting, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to help protect the safety of the victim or prevent further victimization of other detainees or staff in the facility, make medical treatment, investigation, law enforcement, or other security and management decisions.

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the facility shall report that information to the Field Office Director so that the agency can report the allegation to the designated

State or local services agency under applicable mandatory reporting laws.

Staff shall accept reports made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports.

Each facility shall establish a method to receive third-party reports of sexual abuse in its facility and shall make available to the public information on how to report sexual abuse on behalf of a detainee.

1. Alleged Detainee Perpetrator

When a detainee(s) is alleged to be the perpetrator, it is the facility administrator's responsibility to ensure that the incident is promptly referred to the appropriate law enforcement agency having jurisdiction for investigation (if the incident is potentially criminal) and reported to the Field Office Director, who shall report it to the OPR Joint Intake Center.

2. Alleged Staff Perpetrator

When an employee, contractor or volunteer is alleged to be the perpetrator of detainee sexual abuse and/or assault, it is the facility administrator's responsibility to ensure that the incident is promptly referred to the appropriate law enforcement agency having jurisdiction for investigation (if the incident is potentially criminal) and reported to the Field Office Director, who shall report it to the OPR Joint Intake Center. The local government entity or contractor that owns or operates the facility shall also be notified.

Staff, contractors, and volunteers suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.

Upon receiving an allegation that a detainee was sexually abused while confined at another facility, the facility whose staff received the allegation shall notify the Field Office Director and the appropriate

administrator of the facility where the alleged abuse occurred. The notification provided in this section shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The facility shall document that it has provided such notification. The facility where the alleged abuse occurred shall then ensure the allegation is referred for investigation and reported to the appropriate Field Office Director in accordance with this standard.

M. Investigation, Discipline and Incident Reviews

If a detainee alleges sexual assault, a sensitive and coordinated response is necessary. The facility shall coordinate with ICE and other appropriate investigative agencies to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse.

All investigations into alleged sexual assault must be prompt, thorough, objective, fair and conducted by specially trained, qualified investigators.

Where an alleged victim of sexual abuse or assault that occurred elsewhere is subsequently transferred to the detention facility, the facility shall cooperate with any administrative or criminal investigative efforts arising from the incident.

1. Preservation of Evidence

The first security staff member to respond to a report of sexual abuse, or his or her supervisor, shall preserve and protect, to the greatest extent possible, any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, the responder shall request the alleged victim not to take any actions, and shall ensure that the alleged abuser does not take any actions, that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. If the first staff responder is not

a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.

2. Forensic Examinations

Where evidentiarily or medically appropriate, at no cost to the detainee, and only with the detainee's consent, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination by qualified health care personnel, including a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where practicable. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified health care personnel.

As requested by a victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews.

The results of the physical examination and all collected physical evidence are to be provided to the investigative entity. Part of the investigative process may also include an examination and collection of physical evidence from the suspected assailant(s).

In the event the investigation is being conducted by a non-federal investigating agency, the facility shall request that the investigating agency follow the applicable requirements of this standard, including subsections 1 and 2 of this section.

3. Procedures for Administrative Investigations

Upon conclusion of a criminal investigation where the allegation was substantiated, or in instances where no criminal investigation has been completed, an administrative investigation shall be conducted. Upon conclusion of a criminal investigation where the allegation was unsubstantiated, the facility shall review any available completed criminal investigation reports to determine whether an

administrative investigation is necessary or appropriate. Substantiated allegation means an allegation that was investigated and determined to have occurred. Unsubstantiated allegation means an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

Administrative investigations shall be conducted after consultation with the appropriate investigative office within DHS, and the assigned criminal investigative entity. The ICE Office of Professional Responsibility will typically be the appropriate investigative office within DHS, as well as the DHS OIG in cases where the DHS OIG is conducting an investigation.

The facility shall develop written procedures for administrative investigations, including provisions requiring:

- (a) Preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data;
- (b) Interviewing alleged victims, suspected perpetrators, and witnesses;
- (c) Reviewing prior complaints and reports of sexual abuse involving the suspected perpetrator;
- (d) Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee, and without requiring any detainee who alleges sexual abuse to submit to a polygraph;
- (e) An effort to determine whether actions or failures to act at the facility contributed to the abuse;
- (f) Documentation of each investigation by written report, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and

investigative facts and findings; and

(g) Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five years.

Such procedures shall govern the coordination and sequencing of administrative and criminal investigations, in accordance with the first paragraph of this section, to ensure that the criminal investigation is not compromised by an internal administrative investigation.

The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.

When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Following an investigation conducted by the facility into a detainee's allegation of sexual abuse, the facility shall notify the Field Office Director of the results of the investigation and any responsive actions taken so that the information can be reported to ICE headquarters and to the detainee.

4. Discipline

(a) Disciplinary sanctions for staff

Staff shall be subject to disciplinary or adverse action up to and including removal from their position for substantiated allegations of sexual abuse or for violating agency or facility sexual abuse rules, policies or standards. Removal from their position is the presumptive disciplinary sanction for staff who have engaged in or attempted or threatened to engage in those acts of sexual abuse defined in paragraphs (a)-(d) and (g)-(h) of "Staff on Detainee Sexual Abuse and/or Assault" in "B. Acts of Sexual Abuse and/or Assault" in this standard.

The facility shall report all incidents of substantiated sexual abuse by staff, and all removals of staff, or resignations in lieu of removal for violations of

agency or facility sexual abuse policies, to appropriate law enforcement agencies unless the activity was clearly not criminal.

The facility shall also report all such incidents of substantiated abuse, removals or resignations in lieu of removal to the Field Office Director, regardless of whether the activity was criminal, and shall make reasonable efforts to report such information to any relevant licensing bodies, to the extent known.

(b) Corrective action for contractors and volunteers

Any contractor or volunteer who has engaged in sexual abuse shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse, but have violated other provisions within these standards.

Incidents of substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. The facility shall also report such incidents to the Field Office Director regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known.

(c) Disciplinary sanctions for detainees

Detainees shall be subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that the detainee engaged in sexual abuse, consistent with the requirements of Standard 3.1 "Disciplinary System." The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

5. Sexual Abuse Incident Reviews

Each facility shall conduct a sexual abuse incident review at the conclusion of every investigation of sexual abuse and, where the allegation was not determined to be unfounded, prepare a written report within 30 days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse. Unfounded allegation means an allegation that was investigated and determined not to have occurred. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so in a written response. Both the report and response shall be forwarded to the Field Office Director or his or her designee, for transmission to the ICE PSA Coordinator. The facility shall also provide any further information regarding such incident reviews as requested by the ICE PSA Coordinator.

The review team shall consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.

Each facility shall conduct an annual review of all sexual abuse investigations and resulting incident reviews to assess and improve sexual abuse intervention, prevention and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the facility administrator, Field Office Director or his or her designee, for transmission to the ICE PSA Coordinator.

N. Medical and Mental Health Care

Detainee victims of sexual abuse shall be provided emergency medical and mental health services and ongoing care. All treatment services, both emergency and ongoing, shall be provided to the

victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

1. Access to emergency medical and mental health services

- (a) Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care.
- (b) Where evidentiary or medically appropriate, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination, in accordance with the requirements of “M. Investigation, Discipline and Incident Reviews” of this standard.
- (c) Transportation of an alleged victim for emergency care or other services provided off-site shall be arranged in a manner that takes into account the special needs of victimized detainees.

2. Ongoing medical and mental health care for sexual abuse victims and abusers

- (a) Each facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention.
- (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.
- (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.

- (d) Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services.
- (e) Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate.
- (f) The facility shall attempt to conduct a mental health evaluation of all known detainee-on-detainee abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

O. Data Collection

Each facility shall maintain in a secure area all case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment, if necessary, and/or counseling shall be maintained in appropriate files in accordance with these detention standards and applicable policies, and retained in accordance with established schedules.

Particularly applicable to the storage, confidentiality and release of case records are the requirements of the “Confidentiality and Release of Medical Records” section of standard “4.3 Medical Care” and the requirements of standard “7.1 Detention Files,” especially in regard to the Privacy Act of 1974. Because of the very sensitive nature of information about victims and their medical condition, including infectious disease testing, staff must be particularly vigilant about maintaining confidentiality and releasing information only for legitimate need-to-

know reasons.

Monitoring and evaluation are essential for assessing both the rate of occurrence of sexual assault and agency effectiveness in reducing sexually abusive behavior. Accordingly, the facility administrator must maintain two types of files of sexual abuse and assault incidents which include the following minimum information:

1. General files include:

- a. the victim(s) and assailant(s) of a sexual assault;
- b. the date, time, location, and nature of the incident;
- c. the demographic background of the victim and perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming);
- d. detailed reporting timeline, including the names of the individuals who reported the incident and received the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command;
- e. any injuries sustained by the victim;
- f. all formal and/or informal action taken, including all post-report follow up response taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.);
- g. all reports;
- h. medical forms or other relevant medical information;
- i. supporting memos and videotapes, if any;
- j. any sanctions imposed on the perpetrator; and
- k. any other evidentiary materials pertaining to the allegation.

The facility administrator shall maintain these files chronologically in a secure location.

In addition, the facility administrator shall maintain a listing of the names of sexual assault victims and assailants, along with the dates and locations of all sexual assault incidents occurring within the facility, on his/her computerized incident reporting system. Such information shall be maintained on a need-to-know basis in accordance with the standards “4.3 Medical Care” and “7.1 Detention Files,” which includes protection of electronic files from unauthorized access. At no time may law enforcement sensitive documents or evidence be stored at the facility. Access to this designation shall be limited to those staff involved in the treatment of the victim or the investigation of the incident. The authorized designation shall allow appropriate staff to track the detainee victim or assailant of sexual assault across the system.

On an ongoing basis, the facility PSA Compliance Manager and facility administrator must work with the Field Office and ICE PSA Coordinator to share data regarding sexual abuse incidents and response.

P. Facility Audits

Facilities shall cooperate with all DHS audits of the facility’s compliance with this standard, including by making available relevant documents, records, and other information as requested (including available videotapes and other electronically available data). Upon request, facilities shall also provide to DHS the results of any audits conducted of the facility against the DOJ “National Standards to Prevent, Detect, and Respond to Prison Rape.”

Facilities shall permit auditors access to all areas of the facility, and shall make available space suitable for interviews of detainees and staff. Detainees shall be permitted to have private interviews with auditors, and to send confidential information or correspondence to the auditor.

Appendix 2.11.A: Sample Sexual Abuse and Assault Prevention and Intervention Program Policy¹

I. Zero Tolerance Policy

[FACILITY] maintains a zero-tolerance policy for all forms of sexual abuse or assault. It is the policy of [FACILITY] to provide a safe and secure environment for all detainees, employees, contractors, and volunteers, free from the threat of sexual abuse or assault, by maintaining a Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program that ensures effective procedures for preventing, reporting, responding to, investigating, and tracking incidents or allegations of sexual abuse or assault.

Sexual abuse or assault of detainees by other detainees or by employees, contractors, or volunteers is prohibited and subject to administrative, disciplinary, and criminal sanctions.

II. Definitions

For the purposes of this policy, the following definitions apply:

Sexual abuse of a detainee by another detainee includes any of the following acts by one or more

¹ This document represents a template Sexual Abuse and Assault Prevention and Intervention Program policy, as required by Standard 2.11 “Sexual Abuse and Assault Prevention and Intervention” of the ICE 2011 Performance-Based National Detention Standards (PBNDS 2011). Facilities may choose to use this format as a manner of fulfilling the requirements for a written policy detailed in “A. Written Policies and Procedures” of Standard 2.11.

COLOR KEY:

Provisions indicated in black font comprehensively incorporate the requirements in Standard 2.11 and DHS PREA standards.

Text indicated in **red bold font** identifies sections where facility-specific information must be included to satisfy the requirements.

detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- a. Contact between the penis and the vulva or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina, or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- d. Touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- e. Threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- a. Contact between the penis and the vulva or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina, or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member,

contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;

- d. Intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- f. Repeated verbal statements or comments of a sexual nature to a detainee;
- g. Any display of his or her uncovered genitalia, buttocks, or breast in the presence of a detainee; or
- h. Voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism: staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring a detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing bodily functions.

Staff and detainee perpetrators of sexual abuse, as well as detainees who engage in consensual sexual conduct, are subject to administrative and disciplinary sanctions. The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.

Contractor: A person who or entity that provides services on a recurring basis pursuant to a contractual agreement with the facility.

Volunteer: An individual who donates time and effort on a recurring basis to enhance the activities and programs of the facility.

III. Compliance Manager

The facility shall designate a Prevention of Sexual Assault (PSA) Compliance Manager who shall serve as the facility point of contact for the local field office and ICE PSA Coordinator. The PSA Compliance Manager must have sufficient time and authority to oversee facility efforts to comply with facility sexual abuse and assault prevention and intervention policies and procedures. The Compliance Manager shall:

1. Assist with the development of written policies and procedures for the SA-API Program, and with keeping them current;
2. Assist with the development of initial and ongoing training protocols;
3. Serve as a liaison with other agencies;
4. Coordinate the gathering of statistics and reports on allegations of sexual abuse or assault;
5. Review the results of every investigation of sexual abuse and assist in conducting an annual review of all investigations to assess and improve prevention and response efforts; and
6. Review facility practices to ensure required levels of confidentiality are maintained.

[INSERT ANY ADDITIONAL DUTIES OF THE COMPLIANCE MANAGER AT THIS FACILITY RELATED TO SEXUAL ABUSE PREVENTION OR INTERVENTION]

IV. Prevention

All staff (employees, volunteers, and contractors) are responsible for being alert to signs of potential sexual abuse or assault, and to situations in which sexual abuses or assaults might occur. If a facility staff member has a reasonable belief that a detainee is subject to a substantial risk of imminent sexual

abuse, he or she shall take immediate action to protect the detainee.

A. Screening and Classification

1. Screening and Classification Requirements

- a. All detainees shall be screened upon arrival at the facility for potential risk of sexual victimization or sexually abusive behavior, and shall be housed to prevent sexual abuse or assault, taking necessary steps to mitigate any such danger.
- b. Each new detainee shall be kept separate from the general population until he/she has been classified and may be housed accordingly.
- c. The initial classification process and initial housing assignment should be completed within twelve hours of admission to the facility.
- d. The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization:
 - 1) Whether the detainee has a mental, physical, or developmental disability;
 - 2) The age of the detainee;
 - 3) The physical build and appearance of the detainee;
 - 4) Whether the detainee has previously been incarcerated or detained;
 - 5) The nature of the detainee's criminal history;
 - 6) Whether the detainee has any convictions for sex offenses against an adult or child;
 - 7) Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

8) Whether the detainee has self-identified as having previously experienced sexual victimization; and

9) The detainee's own concerns about his or her physical safety.

Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to items (1), (7), (8), or (9) above.

- e. The initial screening shall consider prior acts of sexual abuse or assault, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse or assault, as known to the facility, in assessing detainees for risk of being sexually abusive.
- f. The facility shall implement appropriate protections on responses to questions asked pursuant to this screening, limiting dissemination, and ensuring that sensitive information is not exploited to the detainee's detriment by staff or other detainees or inmates.
- g. If screening indicates that a detainee has experienced prior sexual victimization or perpetrated sexual abuse, staff shall, as appropriate, ensure that the detainee is immediately referred to a qualified medical or mental health practitioner for medical and/or mental health follow-up as appropriate. When a referral for medical follow-up is initiated, the detainee shall receive a health evaluation no later than two working days from the date of assessment. When a referral for mental health follow-up is initiated, the detainee shall receive a mental health evaluation no later than 72 hours after the referral.
- h. Detainees considered at risk for sexual victimization shall be placed in the least restrictive housing that is available and appropriate. If appropriate custodial options

are not available at the facility, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance. Such detainees may be assigned to administrative segregation for protective custody only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

- i. The facility shall reassess each detainee's risk of victimization or abusiveness between 60 and 90 days from the date of the initial assessment, and at any other time when warranted based upon the receipt of additional, relevant information or following an incident of abuse or victimization.
- j. When making assessment and housing decisions for a transgender or intersex detainee, the facility shall consider the detainee's gender self-identification and an assessment of the effects of placement on the detainee's health and safety. The facility shall consult a medical or mental health professional as soon as practicable on this assessment. The facility should not base placement decisions of transgender or intersex detainees solely on the identity documents or physical anatomy of the detainee; a detainee's self-identification of his/her gender and self-assessment of safety needs shall always be taken into consideration as well. The facility's placement of a transgender or intersex detainee shall be consistent with the safety and security considerations of the facility, and placement and programming assignments for each transgender or intersex detainee shall be reassessed at least twice each year to review any threats to safety experienced by the detainee.
- k. When operationally feasible, transgender and intersex detainees shall be given the

opportunity to shower separately from other detainees.

2. *Screening and Classification Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- REFERENCES TO SPECIFIC SCREENING FORMS OR DOCUMENTS USED BY THE FACILITY
- REFERENCES TO SPECIFIC SOURCES OF INFORMATION AT THE FACILITY RELATED TO SCREENING CRITERIA
- PROCEDURES TO PROTECT SCREENING INFORMATION
- RELEVANT PROCEDURES FOR REFERRAL FOR MEDICAL OR MENTAL HEALTH FOLLOW-UP
- RELEVANT STANDARDS AND REQUIREMENTS ON THE MANAGEMENT OF ADMINISTRATIVE SEGREGATION
- SPECIFIC HOUSING OPTIONS TO BE CONSIDERED FOR DIFFERENT DETAINEES OF VARYING RISK LEVELS INCLUDING VULNERABLE DETAINEES
- PROCEDURES FOR CLASSIFICATION REVIEW
- PROCESS FOR CLASSIFICATION AND HOUSING OF TRANSGENDER AND INTERSEX DETAINEES]

B. Staff Training

1. *Staff Training Requirements*

- a. Training on the facility's SAAP Program shall be included in initial and annual refresher training for all employees.
- b. Training shall include:

- 1) The facility's zero-tolerance policies for all forms of sexual abuse;
 - 2) Definitions and examples of prohibited and illegal sexual behavior;
 - 3) The right of detainees and staff to be free from sexual abuse, and from retaliation from reporting sexual abuse;
 - 4) Instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
 - 5) Recognition of situations where sexual abuse and/or assault may occur;
 - 6) How to avoid inappropriate relationships with detainees;
 - 7) Working with vulnerable populations and addressing their potential vulnerability in the general population;
 - 8) Recognition of the physical, behavioral, and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences;
 - 9) The requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes;
 - 10) The investigation process and how to ensure that evidence is not destroyed;
 - 11) Prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or physical disabilities;
 - 12) How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
 - 13) Instruction on reporting knowledge or suspicion of sexual abuse and/or assault; and
 - 14) Instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and/or assault.
- c. All volunteers and other contractors² who have contact with detainees shall be trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of ICE and the facility's zero-tolerance policy and informed how to report such incidents.
 - d. In addition to the general training, all facility staff responsible for conducting sexual abuse or assault investigations shall receive specialized training that covers, at a minimum, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or prosecutorial referral, and information about effective cross-agency coordination in the investigation process. The facility must maintain written documentation verifying specialized training provided to investigators pursuant to this requirement.
 - e. Facility medical staff shall be trained in procedures for examining and treating victims of sexual abuse, in facilities where medical staff may be assigned these activities.

² In this section, the term *other contractor* means a person who provides services on a non-recurring basis to the facility pursuant to a contractual agreement with the facility.

Such specialized training shall include detecting and assessing signs of sexual abuse and assault, preserving physical evidence of sexual abuse, responding effectively to victims of sexual abuse and assault, and how and to whom to report allegations or suspicions of sexual abuse or assault.

- f. The facility shall maintain documentation verifying employee, volunteer and contractor training.

2. *Staff Training Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- MORE SPECIFIC DESCRIPTION OF GENERAL AND/OR SPECIALIZED TRAINING CONTENT MEETING MINIMUM ELEMENTS ABOVE
- DESCRIPTION OF HOW TRAINING RECORDS ARE DOCUMENTED AT THE FACILITY
- PROCEDURES FOR TRAINING OTHER CONTRACTORS AND VOLUNTEERS]

C. **Detainee Education**

1. *Detainee Education Requirements*

- a. Upon admission to [FACILITY], all detainees shall be notified of the facility's zero-tolerance policy for all forms of sexual abuse and assault through the orientation program and detainee handbook, and provided with information about the facility's SAAPI Program. Such information shall include, at a minimum:
 - 1) the facility's zero tolerance policy for all forms of sexual abuse or assault;
 - 2) the name of the facility PSA Compliance Manager, and information about how to contact him/her;
 - 3) prevention and intervention strategies;

- 4) definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity;
 - 5) explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the DHS/OIG and the ICE/OPR investigation processes;
 - 6) information about self-protection and indicators of sexual abuse and assault;
 - 7) prohibition against retaliation, including an explanation that reporting an assault shall not negatively impact the detainee's immigration proceedings; and
 - 8) the right of a detainee who has been subjected to sexual abuse to receive treatment and counseling.
- b. The facility shall provide the detainee notification, orientation, or instruction in formats accessible to all detainees, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to detainees who have limited reading skills.
 - c. The facility shall maintain documentation of detainee participation in the instruction session.
 - d. The facility shall post on all housing unit bulletin boards the following notices:
 - 1) The DHS-prescribed sexual abuse and assault awareness notice;
 - 2) The name of the PSA Compliance Manager; and
 - 3) Information about local organization(s) that can assist detainees who have been victims of sexual abuse or assault, including mailing addresses and

telephone numbers (incl. toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.

- a. The facility shall make available and distribute the DHS-prescribed “Sexual Assault Awareness Information” pamphlet.

2. *Detainee Education Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING, E.G.:

- SPECIFIC METHOD OF ORIENTATION AT THE FACILITY (E.G. IN-PERSON SESSION, VIDEO)
- SPECIFIC CONTENT OF DETAINEE ORIENTATION PROGRAMS AS RELATED TO SEXUAL ABUSE
- SPECIFIC PROCEDURES FOR LEP DETAINEES, DETAINEES WITH DISABILITIES, AND DETAINEES WHO HAVE LIMITED LITERACY
- LOCAL ORGANIZATION INFORMATION TO BE PROVIDED
- MORE SPECIFIC DESCRIPTION OF HOW DETAINEE PARTICIPATION IS TO BE DOCUMENTED AT THE FACILITY]

D. Limits to Cross-Gender Viewing and Searches

1. *Viewing and Searches Requirements for Detainees of the Opposite Gender*

- a. Pat-down searches of male detainees by female staff shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required or in exigent circumstances.

- b. Pat-down searches of female detainees by male staff shall not be conducted unless in exigent circumstances.
- c. All pat-down searches by staff of the opposite gender shall be documented.
- d. Strip searches or visual body cavity searches by staff of the opposite gender shall not be conducted except in exigent circumstances, including consideration of officer safety, or when performed by medical practitioners. Staff shall not conduct visual body cavity searches of juveniles and, instead, shall refer all such body cavity searches of juveniles to a medical practitioner.
- e. All strip searches and visual body cavity searches shall be documented.
- f. Detainees shall be able to shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine cell checks or is otherwise appropriate in connection with a medical examination or monitored bowel movement. Staff of the opposite gender shall announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing.
- g. The facility shall not search or physically examine a detainee for the sole purpose of determine the detainee’s genital characteristics. If the detainee’s gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, learning that information as part of a medical examination that all detainees must undergo as part of intake or other processing procedure conducted in private, by a medical practitioner.

- h. All pat-down searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety.

2. *Viewing and Searches Procedures for Detainees of the Opposite Gender*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- PROTOCOLS FOR CONDUCTING PROFESSIONAL AND RESPECTFUL BODY SEARCHES
- PROCEDURES FOR ASCERTAINING WHETHER STAFF OF THE SAME GENDER IS AVAILABLE TO CONDUCT A PAT SEARCH
- SPECIFIC METHOD OR LOCATION FOR SEARCH DOCUMENTATION AT THE FACILITY]

E. Detainee Supervision

1. *Detainee Supervision Requirements*

- a. The facility shall ensure that it maintains sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, video monitoring, to protect detainees against sexual abuse.
- b. The facility administrator shall determine security needs based on a comprehensive staffing analysis and a documented comprehensive supervision guideline that is reviewed and updated at least annually.
- c. In determining adequate levels of detainee supervision and determining the need for video monitoring, the facility shall take into consideration generally accepted detention and correctional practices, any judicial findings of inadequacy, the physical layout of each facility, the composition of the detainee population, the prevalence of substantiated

and unsubstantiated incidents of sexual abuse as well as other incidents reflecting on facility security and detainee safety, the findings and recommendations of sexual abuse incident review reports or other findings reflecting on facility security and detainee safety, the length of time detainees spend in agency custody, and any other relevant factors.

- d. Frequent unannounced security inspections shall be conducted to identify and deter sexual abuse of detainees. Inspections will occur on night as well as day shifts. Staff are prohibited from alerting others that these security inspections are occurring, unless such announcement is related to the legitimate operational functions of the facility.

2. *Detainee Supervision Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- ELEMENTS OF THE COMPREHENSIVE SUPERVISION GUIDELINE
- PROCEDURE FOR ANNUAL REVIEWS
- PROCEDURES FOR CONDUCTING FREQUENT UNANNOUNCED SECURITY INSPECTIONS]

F. Transportation

1. *Transportation Requirements*

- a. Detainees identified as being “at risk” for sexual victimization shall be transported in accordance with that special safety concern.
- b. Transportation staff shall seat each detainee in accordance with written procedures from the facility administrator, with particular attention to detainees who may need to be

afforded closer observation for their own safety.

2. *Transportation Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- SPECIFIC INSTRUCTIONS FOR SEATING DETAINEES WHO MAY NEED CLOSER OBSERVATION]

G. Upgrades to Facilities and Technologies

1. *Requirements for Upgrades to Facilities and Technologies*

- a. When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification upon its ability to protect detainees from sexual abuse.
- b. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology in a facility, the facility shall consider how such technology may enhance its ability to protect detainees from sexual abuse.

2. *Upgrades to Facilities and Technology Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- FACTORS THE FACILITY SHOULD TAKE INTO CONSIDERATION IN ASSESSING HOW UPGRADE PLANS CAN HELP BETTER PROTECT AGAINST ABUSE – E.G. EFFECTS ON BLIND SPOTS IN PHYSICAL LAYOUT, ETC.]

V. Accommodating Detainees with Disabilities or Limited English Proficiency

A. Accommodation Requirements

1. The facility shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. Such steps shall include, when necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision, by:
 - a. Providing access to in-person, telephonic, or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.
 - b. Providing access to written materials related to sexual abuse in formats or through methods that ensure effective communication.
2. The facility shall take steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse to detainees who are limited English proficient, including steps to provide in-person or telephonic interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary.
3. In matters relating to allegations of sexual abuse, the facility shall employ effective expressive and receptive verbal communication techniques while communicating with detainees with disabilities in accordance with professionally accepted standards of care. The facility shall provide detainees with disabilities and detainees

with limited English proficiency with in-person or telephonic interpretation services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and ICE determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse.

4. Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for any significant segments of the population with limited English proficiency. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

B. Accommodation Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- SPECIFIC METHODS AT THE FACILITY FOR ARRANGING IN-PERSON, TELEPHONIC, AND/OR VIDEO INTERPRETIVE SERVICES (DESIGNATED STAFF AND PROFESSIONAL INTERPRETATION SERVICES AVAILABLE AT THE FACILITY)
- INSTRUCTIONS FOR USING FACILITY TELEPHONIC INTERPRETER LINE OR REQUESTING WRITTEN TRANSLATIONS
- INSTRUCTIONS FOR WORKING WITH DETAINEES WITH DISABILITIES AND PROCURING ANY NECESSARY ACCOMMODATIONS

- PROCEDURES FOR OBTAINING APPROVAL BY AN ICE OFFICIAL FOR THE USE OF ANOTHER DETAINEE TO PROVIDE INTERPRETATION
- ANY APPLICABLE CROSS-REFERENCES TO THE FACILITY'S LEP PLAN OR PROCEDURES]

VI. Detainee Reporting Procedures

A. Detainee Reporting Requirements

1. Detainees shall have multiple ways to privately, and if desired, anonymously, report signs or incidents of sexual abuse and assault, retaliation for reporting sexual abuse, or staff neglect or violations of responsibilities that may have contributed to such incidents, and will not be punished for reporting.
2. Staff shall take seriously all statements from detainees claiming to be victims of sexual abuse or assault, and shall respond supportively and non-judgmentally.
3. Any detainee may report acts of sexual abuse or assault to any employee, contractor, or volunteer.
4. If a detainee is not comfortable with making the report to immediate point-of-contact line staff, he/she shall be allowed to make the report to a staff person with whom he/she is comfortable in speaking about the allegations.
5. The facility shall provide instruction on how detainees may contact their consular official or the DHS Office of the Inspector General, to confidentially and if desired, anonymously, report these incidents.
6. Reporting Through Grievance System
 - a. Formal grievances related to sexual abuse and assault may be filed at any time during, after, or in lieu of lodging an informal grievance or

complaint and with no time limit imposed on when a grievance may be submitted.

- b. Written procedures must be implemented for identifying and handling time-sensitive grievances that involve an immediate threat to detainee health, safety, or welfare related to sexual abuse or assault. Decisions on grievances shall be issued within five days of receipt and appeals shall be responded to within 30 days.
- c. Detainees may obtain assistance from another detainee, the housing officer or other facility staff, family members, or legal representatives. Staff shall take reasonable steps to expedite requests for assistance from these other parties
- d. All grievances related to sexual abuse and the facility's decision on any such grievance must be forwarded to the Field Office Director.

B. Detainee Reporting Procedures

Detainee reports of sexual abuse or assault, retaliation for reporting sexual abuse or assault, and/or staff neglect or violations of responsibilities that may have contributed to such incidents may be made using any available methods of communication, including but not limited to:

Reports to the Facility:

- a. Verbal reports to any staff member (including the PSA Compliance Manager or medical staff)
- b. Written informal or formal requests or grievances to the facility
- c. Sick call requests

Reports to Family Members, Friends, or Other Outside Entities:

- d. Reports to an individual or organization outside the facility who can contact facility staff

Reports to DHS/ICE:

- e. Written informal or formal requests or grievances (including emergency grievances) to the ICE Field Office
- f. Telephone calls or written reports to the DHS/OIG, ICE/OPR, or ICE/DRIL

Reports to Consulates:

- g. Telephone calls or written reports to consular officials

[INSERT SPECIFIC METHODS FOR WRITTEN COMMUNICATION WITH FACILITY STAFF, INCLUDING:

- PROCESS FOR HANDLING DETAINEE GRIEVANCES RELATED TO SEXUAL ASSAULT
- PROCESS FOR FORWARDING GRIEVANCES RELATED TO SEXUAL ABUSE TO THE ICE FOD
- ANY ADDITIONAL METHODS AT THE FACILITY FOR DETAINEES TO MAKE PRIVATE REPORTS]

VII. Staff Notification and Reporting

A. Staff Notification and Reporting Requirements

- 1. All staff must immediately report:
 - a. Any knowledge, suspicion, or information regarding an incident or allegation of sexual abuse occurring at the facility;
 - b. Any retaliation against detainees or staff who reported or participated in an investigation about sexual abuse or assault; and

- c. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
2. Staff must also be able to report the above outside of the chain of command.
3. Staff shall accept reports made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports.
4. The facility shall establish a method to receive third-party reports of sexual abuse in its facility, and shall make available to the public information on how to report sexual abuse on behalf of a detainee.
5. The facility administrator shall promptly report the incident to the ICE Field Office Director, and refer all cases that appear potentially to support criminal prosecution to the appropriate law enforcement agency having jurisdiction for investigation.
6. If an employee, contractor, or volunteer is alleged to be the perpetrator of detainee sexual abuse or assault, the facility administrator shall also notify the local government entity or contractor that operates the facility.
7. If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the facility shall report that information to the Field Office Director so that ICE can report the allegation to the designated State or local services agency under applicable mandatory reporting laws.
8. Information concerning the identity of a detainee victim reporting a sexual assault, and the facts of the report itself, shall be limited to those who have a need-to-know in order to make decisions concerning the victim's welfare, and for law enforcement/investigative purposes. Apart from such reporting, staff shall not reveal any information related to a sexual abuse and assault report to anyone other than to the extent

necessary to help protect the safety of the victim or prevent further victimization of other detainees or staff in the facility, or to make medical treatment, investigation, law enforcement, or other security and management decisions.

9. Upon receiving an allegation that a detainee was sexually abused or assaulted while confined at another facility, the facility administrator shall notify the Field Office Director and the appropriate administrator of the facility where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation. The facility administrator shall notify the detainee in advance of such reporting. The facility shall document that it has provided such notification. A facility receiving such notification shall ensure the allegation is referred for investigation and reported to the Field Office Director.

B. Staff Notification and Reporting Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- FACILITY CHAIN-OF-COMMAND REPORTING STRUCTURE AND PROCEDURES/FORMS FOR DOCUMENTING IN WRITING ALL REPORTED ALLEGATIONS OR SUSPICIONS
- METHOD(S) FOR STAFF TO REPORT OUTSIDE THE CHAIN-OF-COMMAND
- METHOD FOR FACILITY TO RECEIVE THIRD-PARTY REPORTS OF SEXUAL ABUSE
- METHOD BY WHICH FACILITY MAKES AVAILABLE TO THE PUBLIC INFORMATION ON HOW TO REPORT SEXUAL ABUSE ON BEHALF OF A DETAINEE
- FACILITY PROCEDURES FOR REFERRAL TO APPROPRIATE LAW ENFORCEMENT AGENCIES

- METHOD OF FACILITY REPORTING TO ICE
- FACILITY REPORTING TO OTHER CONFINEMENT FACILITIES]

VIII. Response

A. First Response

1. First Response Requirements

- Staff shall take immediate action to separate any detainee who alleges that he/she has been sexually abused or assaulted from the alleged assailant, and shall refer the detainee for a medical examination and/or clinical assessment for potential negative symptoms.
- Staff suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.
- The first security staff member to respond to a report of sexual abuse, or his or her supervisor, shall preserve and protect, to the greatest extent possible, any crime scene until appropriate steps can be taken to collect any evidence.
- If the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder shall:
 - 1) Request the alleged victim not to take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
 - 2) Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

- If the first staff responder is not a security staff member, the responder shall request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.

2. First Response Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- INSTITUTIONAL PLAN TO COORDINATE STAFF FIRST RESPONDERS, MEDICAL AND MENTAL HEALTH PRACTITIONERS, INVESTIGATORS, AND FACILITY LEADERSHIP RESPONSE
- REMOVING STAFF SUSPECTED OF PERPETRATING SEXUAL ABUSE FROM DETAINEE CONTACT
- WHERE APPLICABLE, FACILITY UNIFORM EVIDENCE PROTOCOL, WHICH MAXIMIZES THE POTENTIAL FOR OBTAINING USABLE PHYSICAL EVIDENCE FOR ADMINISTRATIVE PROCEEDINGS AND CRIMINAL PROSECUTIONS]

B. Specialized Response and Victim Services

1. Specialized Response and Victim Services Requirements

- The facility must use a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.
- Staff shall utilize available community resources and services to provide valuable expertise and support in areas of crisis intervention, counseling, investigation and

the prosecution of sexual abuse and assault perpetrators to most appropriately address victims' needs.

- c. The facility shall attempt to enter into memoranda of understanding or other agreements with community service providers or, if local providers are not available, national organizations that provide legal advocacy and confidential emotional support services for immigrant victims of crime.
- d. The facility administrator shall establish procedures to make available to detainees information about local organizations that can assist detainees who have been victims of sexual abuse, including mailing addresses and telephone numbers (including toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.
- e. Following an allegation of sexual abuse, the facility administrator shall also establish procedures to make available, to the full extent possible, additional outside victim services.
- f. The facility shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available, the facility shall work with ICE to provide these services from a qualified staff member from a community-based organization, or a qualified ICE staff member.³ The victim advocate shall be able to provide emotional support, crisis intervention, information, and referrals.
- g. The facility shall enable reasonable communication between detainees and these

organizations or agencies, in as confidential a manner as possible.

- h. Staff shall inform detainees, prior to giving them access to outside resources, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
- i. If a victim is transferred between detention facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services (unless the victim requests otherwise in the case of transfer to a non-ICE facility). If the receiving facility is unknown to the sending facility, the sending facility shall notify the Field Office Director, so that he or she can notify the receiving facility.
- j. Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the detention facility, the facility shall comply with all response and intervention requirements outlined by this policy, as appropriate based on the nature and status of the case.
- k. If any of these requirements cannot be met, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance.

2. *Specialized Response and Victim Services Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- FACILITY PLAN TO COORDINATE ACTIONS TAKEN BY STAFF FIRST RESPONDERS, MEDICAL AND MENTAL HEALTH

³ A qualified ICE staff member or a qualified community-based staff member is an individual with training on sexual assault and forensic examination issues in general.

PRACTITIONERS, INVESTIGATORS, AND FACILITY LEADERSHIP

- REFERENCES TO ANY MEMORANDA OF UNDERSTANDING (MOU) OR OTHER FACILITY AGREEMENTS WITH COMMUNITY SERVICE PROVIDERS TO PROVIDE SUPPORT SERVICES FOR VICTIMS
- CONTACTS FOR AVAILABLE COMMUNITY SERVICE PROVIDERS IN THE AREA (INCLUDING ANY RAPE CRISIS CENTERS), AND PROCEDURES FOR CONTACTING THEM
- FACILITY PROCESSES TO INVOLVE AVAILABLE OUTSIDE COMMUNITY RESOURCES AND SERVICES, INCLUDING NATIONAL ORGANIZATIONS IF LOCAL ORGANIZATIONS ARE NOT AVAILABLE]

C. Housing and Protection for Victims

1. *Housing and Protection Requirements*

- a. Victims and vulnerable detainees shall be housed in a supportive environment that represents the least restrictive housing option possible (e.g. in a different housing unit, transfer to another facility, medical housing, or protective custody), and that will, to the extent possible, permit the victim the same level of privileges he/she was permitted immediately prior to the sexual assault. This placement should take into account any ongoing medical or mental health needs of the victim.
- b. Victims may not be held for longer than five days in any type of administrative segregation for protective purposes, except in highly unusual circumstances or at the request of the victim. The facility shall notify the appropriate ICE Field Office Director whenever a detainee victim, or detainee placed due to vulnerability to sexual abuse or

assault, has been held in administrative segregation for 72 hours.

- c. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a proper re-assessment, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault.
- d. Staff, contractors, and volunteers shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force.
- e. The facility shall employ multiple protection measures, such as housing changes, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or for cooperating with investigations.
- f. For at least 90 days following a report of sexual abuse or assault, the facility, in concert with ICE, shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include any detainee disciplinary reports, housing, or program changes, or negative performance reviews or reassignments by staff. The facility shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- g. If any of these requirements cannot be met, the facility will consult with the ICE Field

Office Director to determine if ICE can provide additional assistance.

2. *Housing and Protection Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- SPECIFIC FACILITY HOUSING OPTIONS TO BE CONSIDERED FOR VICTIMS AND ASSAILANTS OF VARIOUS SECURITY CLASSIFICATION LEVELS
- SPECIFIC PROTECTION MEASURES THE FACILITY MAY TAKE FOR DETAINEES OR STAFF FEARING RETALIATION
- ANY ADDITIONAL ITEMS TO BE MONITORED FOR SIGN OF POSSIBLE RETALIATION AGAINST VICTIMS OR INDIVIDUALS WHO REPORT SEXUAL ABUSE]

IX. Health Care Services

A. Health Care Services Requirements

1. Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care.
2. Transportation of an alleged victim for emergency care or other services provided off-site shall be arranged in a manner that takes into account the special needs of victimized detainees.
3. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention.
4. The evaluation and treatment of such victims shall include, as appropriate, follow-up

services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

5. Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services.
6. Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate.
7. The facility shall attempt to conduct a mental health evaluation of all known detainee-on-detainee abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.
8. All treatment services, both emergency and ongoing, shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility shall provide such victims with medical and mental health services consistent with the community level of care.

B. Health Care Services Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- PROCEDURES FOR COORDINATING WITH AVAILABLE OFF-SITE SERVICE PROVIDERS, AS NECESSARY]

X. Investigation

A. Investigation Requirements

1. The facility to establish a protocol, to ensure that each allegation of sexual abuse is investigated by facility, or referred to an appropriate investigative authority. This protocol shall be posted on the facility website, or otherwise made available to the public.
2. The facility shall coordinate with ICE and other appropriate investigative entities to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse. All investigations must be prompt, thorough, objective, fair, and conducted by specially trained, qualified investigators.
3. Where evidentiarily or medically appropriate, at no cost to the detainee, and only with the detainee's consent, the facility administrator shall arrange for an alleged victim to undergo a forensic medical examination by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE), where practicable. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified health care personnel.
4. As requested by a victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews.
5. The results of the physical examination and all collected physical evidence are to be provided to the investigative entity.
6. In the event the investigation is being conducted by a non-federal investigating agency, the facility shall request that the investigating agency follow the applicable requirements of this policy, including requirements related to evidence preservation and forensic examinations.
7. Upon conclusion of a criminal investigation where the allegation was substantiated, an administrative investigation shall be conducted. Upon conclusion of a criminal investigation where the allegation was unsubstantiated, the facility shall review any available completed criminal investigation reports to determine whether an administrative investigation is necessary or appropriate. Administrative investigations shall be conducted after consultation with the appropriate investigative office within DHS, and the assigned criminal investigative entity.
8. Administrative investigations procedures include:
 - a. Preservation of direct and circumstantial evidence, including any available physical DNA evidence and any available electronic monitoring data;
 - b. Interviewing alleged victims, suspected perpetrators, and witnesses;
 - c. Reviewing prior complaints and reports of sexual abuse or assault involving the suspected perpetrator;
 - d. Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee and without requiring any detainee who alleged sexual abuse or assault to submit to a polygraph;
 - e. An effort to determine whether actions or failures to act at the facility contributed to the abuse;
 - f. Documentation of each investigation by written report, which shall include a

description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings;

- g. Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five years; and
 - h. Coordination and sequencing of administrative and criminal investigations to ensure that a criminal investigation is not compromised by an internal administrative investigation.
9. The facility uses no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated.
 10. The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.
 11. When outside agencies investigate sexual abuse and assault, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Where an alleged victim of sexual abuse or assault that occurred elsewhere in ICE custody is subsequently transferred to the facility, the facility shall also cooperate with any administrative or criminal investigative efforts arising from the incident.
 12. Following an investigation conducted by the facility into a detainee's allegation of sexual abuse, the facility shall notify the Field Office Director of the results of the investigation and any responsive actions taken so that the information can be reported to ICE headquarters and to the detainee.

B. Investigation Procedures

2.11 | Sexual Abuse and Assault Prevention and Intervention

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- ADDITIONAL OR MORE SPECIFIC FACILITY PROCESSES FOR CONDUCTING INTERNAL ADMINISTRATIVE INVESTIGATIONS (E.G. EVIDENCE PROCESSING PROTOCOLS, INTERVIEWING PROTOCOLS, ETC.)
- FACILITY PROCEDURES FOR ARRANGING FORENSIC EXAMS, AND FOR ATTEMPTING TO PROCURE A SAFE OR SANE
- SPECIFIC FACILITY PROCEDURES FOR COORDINATION AND SEQUENCING OF INTERNAL ADMINISTRATIVE INVESTIGATIONS AND CRIMINAL INVESTIGATIONS
- GUIDELINES FOR DETERMINING WHEN AN ADMINISTRATIVE INVESTIGATION WILL BE NECESSARY OR APPROPRIATE FOLLOWING A CRIMINAL INVESTIGATION'S FINDING OF UNSUBSTANTIATION
- MEANS BY WHICH THE FACILITY POLICY IS MADE PUBLICALLY AVAILABLE]

XI. Disciplinary Sanctions

A. Staff Discipline

1. Staff Discipline Requirements

- a. Staff shall be subject to disciplinary or adverse action, up to and including removal from their position, for substantiated allegations of sexual abuse or for violating ICE or facility sexual abuse rules, policies, or standards.
- b. Removal from their position is the presumptive disciplinary sanction for staff who have engaged in, attempted, or threatened to engage in sexual abuse, as defined under the definition of staff-on-detainee abuse in Section II, paragraphs (a)-(d) and (g)-(h).

- c. The facility shall report all incidents of substantiated sexual abuse by staff, and all removals of staff, or resignations in lieu of removal for violations of sexual abuse policies, to appropriate law enforcement agencies unless the activity was clearly not criminal. The facility shall also report all such incidents of substantiated abuse, removals, or resignations in lieu of removal to the Field Office Director, regardless of whether the activity was criminal, and shall make reasonable efforts to report such information to any relevant licensing bodies, to the extent known.
- d. Contractors suspected of perpetrating sexual abuse or assault shall be removed from all duties requiring detainee contact pending the outcome of an investigation.
- e. Any contractor or volunteer who has engaged in sexual abuse or assault shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees by contractors or volunteers who have not engaged in sexual abuse or assault, but have violated other sexual abuse policies.
- f. Incidents of substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. The facility shall also report such incidents to the Field Office Director regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known.

2. *Staff Discipline Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- FACILITY DISCIPLINARY PROCESSES AND SANCTIONS FOR STAFF, CONTRACTOR OR VOLUNTEER OFFENSES RELATING TO SEXUAL ABUSE
- PROCEDURES FOR IDENTIFYING AND REPORTING TO RELEVANT LICENSING BODIES]

B. *Detainee Discipline*

1. *Detainee Discipline Requirements*

- a. Detainees shall be subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that the detainee engaged in sexual abuse or assault.
- b. The facility shall not discipline a detainee for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.
- c. For the purpose of disciplinary action, a report of sexual abuse or assault made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- d. If a detainee is mentally disabled or mentally ill but competent, the disciplinary process shall consider whether the detainee's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

2. *Detainee Discipline Procedures*

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **FACILITY DISCIPLINARY PROCESSES AND SANCTIONS FOR DETAINEE OFFENSES RELATING TO SEXUAL ABUSE (OR CROSS-REFERENCES TO FACILITY DETAINEE DISCIPLINARY POLICY)]**

XII. Sexual Abuse Incident and Annual Reviews

A. Review Requirements

1. The facility shall conduct a sexual abuse and assault incident review at the conclusion of every investigation of sexual abuse or assault.
2. For any substantiated or unsubstantiated allegation, the facility shall prepare a written report within 30 days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse and assault.
3. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so in a written response. Both the report and response shall be forwarded to the Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator. The facility shall also provide any further information regarding such incident reviews as requested by the ICE PSA Coordinator.
4. The review team shall consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
5. The facility shall conduct an annual review of all sexual abuse investigations and resulting

incident reviews to assess and improve sexual abuse intervention, prevention, and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the facility administrator and Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator.

B. Review Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- **SPECIFIC PROCEDURES FOR CONDUCTING INCIDENT REVIEWS, INCLUDING DETAILED FACTORS OR CRITERIA TO BE TAKEN INTO CONSIDERATION**
- **SPECIFIC PROCEDURES FOR CONDUCTING ANNUAL REVIEWS, INCLUDING DETAILED FACTORS OR CRITERIA TO BE TAKEN INTO CONSIDERATION]**

XIII. Data Collection

A. Data Collection Requirements

1. The facility shall maintain in a secure area all case records associated with claims of sexual abuse or assault, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment, if necessary.
2. The facility administrator shall maintain two types of files regarding incidents of sexual abuse and assault, which include the following minimum information:
 - a. General files include:
 - the victim(s) and assailant(s) of a sexual assault

- the date, time, location, and nature of the incident
 - the demographic background of the victim and the perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming)
 - detailed reporting timeline, including the names of the individual who reported the incident and received the report of sexual assault, date and time the report was received, and steps taken to communicate the report up the chain of command
 - any injuries sustained by the victim
 - all formal and/or informal action taken, including all post-report follow up response taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.)
 - all reports
 - medical forms or other relevant medical information
 - supporting memos and videotapes, if any
 - any sanctions imposed on the perpetrator
 - any other evidentiary materials pertaining to the allegation
3. The facility administrator shall maintain these files chronologically in a secure location.
 4. The facility administrator shall maintain a listing of the names of sexual assault victims and assailants, along with the dates and locations of all sexual assault incidents

occurring within the facility, on his/her computerized incident reporting system. Such information shall be maintained on a need-to-know basis; access shall be limited to those staff involved in the treatment of the victim or the investigation of the incident. At no time may law enforcement sensitive documents or evidence be stored at the facility.

5. On an ongoing basis, the PSA Compliance Manager and facility administrator must work with the Field Office and ICE PSA Coordinator to share data regarding sexual abuse incidents and response.

B. Data Collection Procedures

[INSERT FACILITY PROCEDURES THAT MEET REQUIREMENTS, INCLUDING:

- NAMES/TYPES OF FILES TO BE MAINTAINED REGARDING INCIDENTS OF SEXUAL ABUSE, TO BE MAINTAINED IN A SECURE AREA]

XIV. Facility Audits

The facility shall cooperate with all DHS audits of the facility's compliance with sexual abuse and assault policies and standards, including by:

1. In advance of and during the on-site audit, making available relevant documents, records, and other information as requested (including available videotapes and other electronically available data);
2. Permitting auditors access to all areas of the facility;
3. Permitting detainees to have private interviews with auditors, and to send confidential correspondence to the auditor; and
4. Making available space suitable for interviews of detainees and staff.

XV. ICE Approval of Facility Policy

The following policies and procedures require approval by the local ICE Field Office.

1. Facility Zero Tolerance Policy outlining the facility's approach to preventing, detecting, and responding to all forms of sexual abuse.
2. Facility policy and procedures to ensure medical staff is trained in procedures for examining and treating victims of sexual abuse (where medical staff may be assigned these duties).
3. Facility policy and procedures specifying appropriate procedures for staff to report any knowledge, suspicion, or information regarding an incident of 1) sexual abuse that occurred in a facility; 2) retaliation against detainees or staff who reported or participated in an investigation about such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
4. Facility policy and procedures for coordination and conduct of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference.
5. Facility policy and procedures regarding disciplinary or adverse actions for staff, up to and including removal, when there is a substantiated allegation of sexual abuse, or when there has been a violation of agency sexual abuse rules, policies, or standards.

**[INSERT FACILITY PROCEDURES TO REQUEST
AND MAINTAIN RECORDS OF ICE FIELD
OFFICE REVIEW AND APPROVAL]**

- **Appendix 2.11.B1: Sexual Abuse and Assault Awareness Brochure (English)**
- **Appendix 2.11.B2: Sexual Abuse and Assault Awareness Brochure (Spanish)**

How to Report Sexual Abuse and Assault

If you feel at risk of being victimized, or if you become a victim of sexual abuse or assault, report the incident immediately. There are many options for reporting. Your ICE Detainee Handbook has more information about each of these:

Report to the Facility

1. Tell any trusted staff member at the facility.
2. File an informal or formal grievance (including an emergency grievance) with the facility.

Report to the ICE Field Office

3. Tell any ICE/ERO staff member who visits the facility.
4. File a written informal or formal request or grievance to ICE/ERO.

Report to DHS or ICE Headquarters

5. Contact the ICE Detention Reporting and Information Line: 1-888-351-4024 or 9116#. Language assistance is available.
6. Contact the DHS Office of Inspector General (OIG):

Write a letter to:

Office of Inspector General/MAIL STOP 0305

Department of Homeland Security

245 Murray Lane, SW Washington, DC 20528-0305

(202) 254-4100 / FAX: (202) 254-4285

Call the toll-free hotline at:

1-800-323- 8603 / 1-844-889-4357 – TTY

Report to Your Consular Official

7. Call or write to your consular official.

Anonymous Reporting

You do not have to give your name to report a sexual abuse or assault. You can choose to report anonymously to the Detention Reporting and Information Line (DRIL) or the DHS OIG. You can also have somebody else report on your behalf to the facility, ICE Headquarters, or the OIG.

Will this Impact my Immigration Case or Detention?

Any report of sexual abuse, or fear of being abused or assaulted, will not negatively affect your immigration case. No one can retaliate against you in any way for reporting sexual abuse or assault.

Confidentiality

Information concerning your identity and the facts of your report will be limited to only those who need to know.



****For more information on this content, please read the ICE Detainee Handbook or ask a trusted facility staff person.****

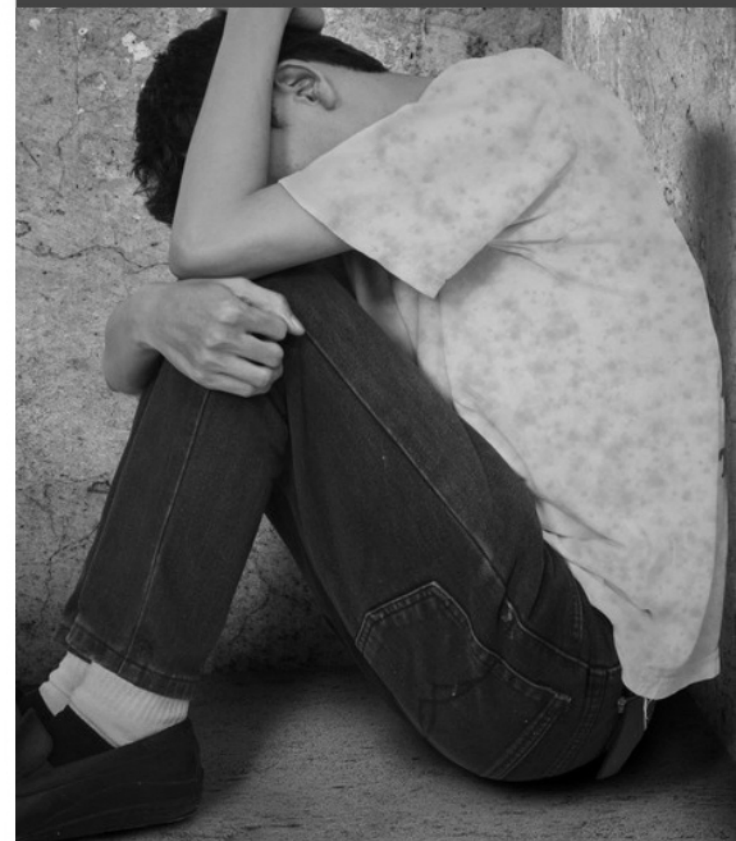


U.S. Immigration
and Customs
Enforcement

2023-ICLI-00006 1896



U.S. Immigration
and Customs
Enforcement



**SEXUAL ABUSE
and ASSAULT
AWARENESS**

www.ICE.gov

What is Sexual Abuse and Assault

Detainee-on-detainee sexual abuse and assault:

All forms of sexual abuse and assault by a detainee against another detainee(s) are prohibited. If another detainee forces you or tries to force you to engage in a sex act, touches the sexual parts of your body, forces you or tries to force you to touch the sexual parts of their body, or uses threats or intimidations to pressure you to engage in sex, it is sexual abuse.

Staff-on-detainee sexual abuse and assault:

All forms of sexual acts between a detainee and a staff member (including contract guards, medical professionals, and volunteers) are prohibited and against the law, regardless of whether they are consensual. If a staff member tries to or actually does have sex with you, intentionally touches you in a sexual manner, makes sexual advances or repeated sexual comments, displays his or her genitals, or engages in voyeurism, it is sexual abuse.

If You Are a Victim of Sexual Abuse or Assault

Whatever your reactions or fears, it is important to understand that you are not to blame. Sexual abuse can violate your sense of safety and trust. You may feel shocked, angry, anxious, depressed, or guilty. You may also experience a variety of physical reactions, from changes in eating and sleeping patterns to nightmares or flashbacks.

These reactions are normal, and help is available. The facility and ICE will help you get support and offer resources specific to your needs.

What Support Can You Expect from ICE and the Facility

You will be offered immediate protection from the perpetrator and you will be referred for a medical examination, when appropriate. You will also be offered mental health services and outside victim services. Some victims may also be encouraged

to receive a sexual assault forensic medical exam, which can help in criminally prosecuting the perpetrator.

How Will Reports be Investigated?

When you report a sexual abuse or assault incident the facility and/or an appropriate law enforcement agency will conduct an investigation. You may be asked to participate in an interview to gather information. ICE will inform you of the result of any investigation once it is completed.

There is a difference between reporting the incident and choosing to press charges. You may choose not to immediately press charges, but you can always decide to do so later. If criminal charges are filed, it will be presented for possible prosecution. It is important for you to discuss any concerns you have with the prosecutor (or your attorney) or a victim advocate.

How Can I Protect Myself from Sexual Abuse or Assault?

Sexual abuse and assault is never the victim's fault. Knowing the warning signs and red flags can help you stay alert and aware:

1. Report concerns.
2. Carry yourself in a confident manner. Many abusers choose victims who look like they would not fight back or who they think are emotionally weak.
3. Do not accept gifts or favors from others. Gifts or favors can come with demands or terms that the giver expects you to accept.
4. Do not accept an offer from another detainee to be your protector.
5. Find a staff member with whom you feel comfortable discussing your fears and concerns.
6. Do not use drugs or alcohol; these can weaken your ability to stay alert and make good judgments.
7. Be clear, direct and firm. Do not be afraid to say "no" or "stop it now."
8. Choose your associates wisely. Look for people who are involved in positive activities like educational programs, work opportunities or counseling groups. Get yourself involved in these activities, if they are available at your facility.
9. If you suspect another detainee is being sexually abused or assaulted, report it using one of the methods listed in this pamphlet.
10. Trust your instincts. Be aware of situations that make you feel uncomfortable. If it does not feel right or safe, leave the situation or seek assistance. If you fear for your safety, report your concerns to staff.



Como Reportar un Abuso o una Agresión Sexual

Si usted se siente a riesgo de ser victimizado o si usted se convierte en una víctima de abuso o agresión sexual, reporte el incidente inmediatamente. Hay muchas opciones para reportar. Su Manual para los Detenidos de ICE contiene más información acerca de éstas:

Repórtelo al Centro

1. Dígaselo a cualquier empleado de confianza del centro.
2. Entregue una queja formal o informal (incluyendo una queja de emergencia) en el centro.

Repórtelo a la Oficina Regional de ICE

3. Dígaselo a cualquier empleado de ICE/ERO que visite el centro.
4. Entregue una petición o queja informal o formal a ICE/ERO.

Repórtelo a las Oficinas Centrales de DHS o ICE

5. Contacte la Línea de Reportes e Información de Detención de ICE: 1-888-351-4024 o 9116#. Hay asistencia de idiomas.
6. Contacte la Oficina del Inspector General de DHS (OIG por sus siglas en inglés):

Envíe una carta a:

DHS Office of Inspector General
Attention: Office of Investigations
Hotline 245 Murray Lane, SW
Building 410/Mail Stop 0305
Washington, DC 20528

Llame gratuitamente a la línea de asistencia:

1-800-323- 8603 / 1-844-889-4357 – TTY

Repórtelo a su Oficial Consular

7. Llame o escríbale a su oficial consular.

Reportar Anónimamente

Usted no tiene que dar su nombre para reportar un abuso o asalto sexual. Usted puede elegir reportar anónimamente a la Línea de información y denuncias del Centro de Detenciones del ICE (DRIL) o al DHS OIG. Usted también puede hacer que otra persona lo reporte por usted a las Oficinas Centrales de ICE o al OIG por usted.

¿Esto impactará mi caso de inmigración o detención?

Cualquier reporte de abuso sexual o temor de ser abusado o agredido no afectará negativamente su caso de inmigración. *Nadie podrá tomar ninguna represalia en contra de usted por haber reportado un abuso o una agresión sexual.*

Confidencialidad

La información concerniente a su identidad y los hechos de su reporte serán limitados a quienes necesitan saberlos.



****Para más información sobre este tema, por favor lea el Manual para los detenidos de ICE o pregúntele a un empleado de confianza del centro.****



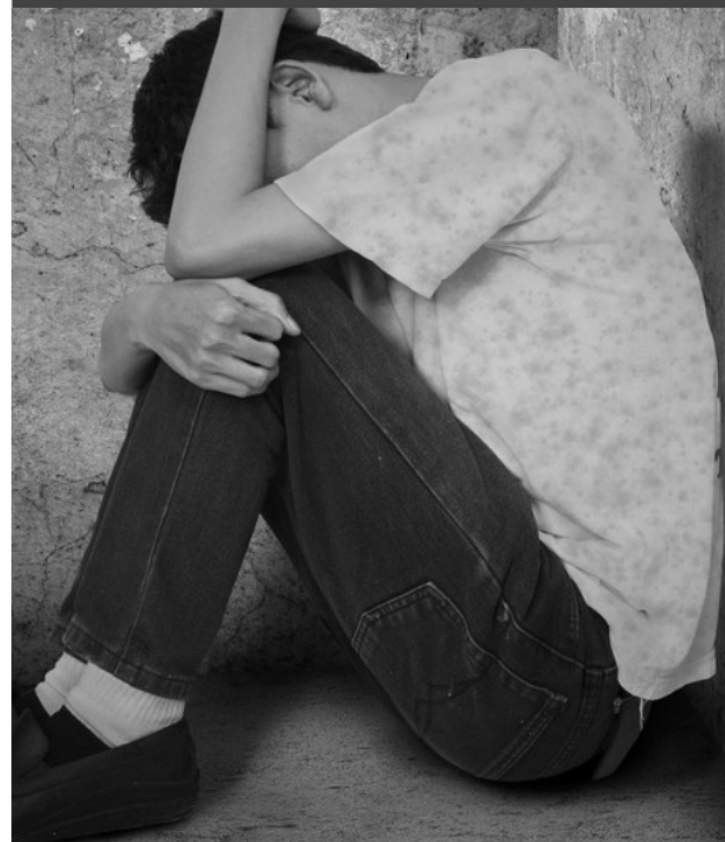
U.S. Immigration
and Customs
Enforcement

2023-ICLI-00006 1898

*Este folleto está destinado a ser distribuido como un folleto tríptico.



U.S. Immigration
and Customs
Enforcement



**CONOCIMIENTO
DEL ABUSO Y LA
AGRESIÓN
SEXUAL**

www.ICE.gov

¿Qué es el abuso y la agresión sexual?

Abuso y agresión sexual por parte de un detenido hacia otro detenido:

Todos los tipos de abuso y agresión sexual por parte de un detenido hacia otro detenido son prohibidos. Si un detenido lo fuerza o intenta forzarlo a participar en cualquier acto sexual, le toca las partes sexuales del cuerpo, lo fuerza a tocarle las partes sexuales de su cuerpo o usa amenazas o intimidación para presionarlo a participar en relaciones sexuales, eso es un abuso sexual.

Abuso o agresión sexual por parte de un empleado hacia un detenido:

Todos los tipos de actos sexuales entre un detenido y un empleado (incluyendo los guardias contratistas, profesionales médicos y voluntarios) son prohibidos y contrarios a la ley, aún si son con consentimiento. Si un empleado intenta o logra tener sexo con usted, intencionalmente lo toca en una manera sexual, le hace proposiciones sexuales o comentarios sexuales repetidos, le muestra su área genital o participa en voyerismo, es un abuso sexual.



Si usted es una víctima de abuso o agresión sexual

Cualesquiera que sean sus reacciones o temores, es importante que entienda que no es culpable. El abuso sexual puede violar su sentido de seguridad y confianza. Puede ser que usted se sienta ofendido, bravo, ansioso, deprimido o culpable. Puede ser que usted también experimente una variedad de reacciones físicas, desde cambios en sus hábitos de comer y dormir hasta pesadillas y flashbacks. Estas reacciones son normales y hay ayuda disponible. El centro y ICE le ayudarán a conseguir apoyo y ofrecen recursos específicos para sus necesidades.

¿Qué apoyo puede esperar de ICE y su centro?

Se le ofrecerá protección inmediata del culpable y usted será referido para un examen médico, cuando sea apropiado. También se le ofrecerán servicios de salud mental y servicios externos para las víctimas. A algunas víctimas también se les recomendará que reciban un examen de medicina forense de abuso sexual, lo cual puede ayudar a procesar criminalmente al culpable.

¿Cómo se investigarán los reportes?

Cuando usted reporte un incidente de abuso o agresión sexual, el centro y/o una agencia adecuada del cumplimiento de la ley realizará una investigación. Puede ser que se le pida que participe en una entrevista para coleccionar información. ICE le informará el resultado de cualquier investigación una vez que ésta haya terminado.

Hay una diferencia entre reportar el incidente y elegir poner cargos. Puede ser que usted elija no poner cargos inmediatamente, pero usted siempre podrá decidir hacerlo luego. Si se formulan cargos criminales, se presentarán para un posible enjuiciamiento. Es importante que usted discuta cualquier preocupación que tenga con el fiscal (o su abogado) o un defensor de víctimas.

¿Cómo puedo protegerme del abuso o la agresión sexual?

El abuso y la agresión sexual nunca son culpa de la víctima. El conocer las señales de alerta y actitudes sospechosas pueden ayudarle a mantenerse alerta y consciente:

1. Reporte sus preocupaciones.
2. Compórtese con firmeza. Muchos abusadores eligen víctimas que lucen como que no se defenderían o que ellos perciben como débiles.
3. No acepte regalos o favores de otros. Los regalos o los favores pueden venir con demandas o términos con los cuales el donante espera que usted cumpla.
4. No acepte una oferta por parte de otro detenido para ser su protector.
5. Busque un empleado con el cual usted se siente cómodo discutiendo sus temores y preocupaciones.
6. No use drogas o alcohol. Estos pueden debilitar sus habilidades para mantenerse alerta y tener buen juicio.
7. Sea claro, directo y firme. No tema decir “no” o “pare ya”.
8. Elija cuidadosamente sus asociados. Busque personas que estén involucradas en actividades positivas como los programas educacionales, oportunidades de empleo o grupos de asesoramiento. Involúcrese en estas actividades, si están disponibles en su centro.
9. Si usted sospecha que otro detenido está siendo abusado o agredido sexualmente, repórtelo usando uno de los métodos listados en este panfleto.
10. Confíe en sus instintos. Esté consciente de situaciones que lo hacen sentirse incómodo. Si no se siente bien o seguro, apártese de la situación o busque asistencia. Si teme por su seguridad, repórtelo sus preocupaciones a un empleado.

Ya Basta



2.12 Special Management Units

I. Purpose and Scope

This detention standard protects detainees, staff, contractors, volunteers and the community from harm by segregating certain detainees from the general population in Special Management Units with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.

This detention standard applies to the following types of facilities housing ICE/ERO detainees:

- Service Processing Centers (SPCs);
- Contract Detention Facilities (CDFs); and
- State or local government facilities used by ERO through Intergovernmental Service Agreements (IGSAs) to hold detainees for more than 72 hours.

Procedures in italics are specifically required for SPCs, CDFs, and Dedicated IGSA facilities. Non-dedicated IGSA facilities must conform to these procedures or adopt, adapt or establish alternatives, provided they meet or exceed the intent represented by these procedures.

For all types of facilities, procedures that appear in italics with a marked (**) on the page indicate optimum levels of compliance for this standard.

Various terms used in this standard may be defined in standard “7.5 Definitions.”

II. Expected Outcomes

The expected outcomes of this detention standard are as follows (specific requirements are defined in “V. Expected Practices”).

1. The facility shall have a Special Management Unit (SMU) with provisions for separating the

administrative segregation section, for detainees segregated from the general population for administrative reasons, from the disciplinary segregation section, for detainees segregated from the general population for disciplinary reasons.

2. Detainees housed in the general population, staff, contractors, volunteers and the local community shall be protected from harm by the segregation of certain detainees in an SMU.
3. Any detainee who represents an immediate, significant threat to safety, security or good order shall be immediately controlled by staff and, if cause exists and supervisory approval granted, placed in administrative segregation. ICE and the detainee shall be immediately provided a copy of the administrative segregation order describing the reasons for the detainee’s placement in the SMU.
4. Administrative segregation may also be available to detainees for the purpose of providing “protective custody.” A detainee shall be placed in “protective custody” status in administrative segregation only when there is documentation and supervisory approval that it is necessary to protect a detainee from harm and that no reasonable alternatives are available.
5. A detainee shall be placed in disciplinary segregation only after a finding by a disciplinary hearing panel that the detainee is guilty of a prohibited act or rule violation classified at a “greatest,” “high” or “high-moderate” level, as defined in “Appendix 3.1.A: Offense Categories,” found in “3.1 Disciplinary System.”
6. Disciplinary segregation shall only be ordered when alternative dispositions may inadequately regulate the detainee’s behavior.
7. Health care personnel shall be immediately informed when a detainee is admitted to an SMU and shall conduct an assessment and review of the detainees medical and mental health status and care needs. Health care personnel shall at a minimum conduct a daily assessment of detainees

- in an SMU. Where reason for concern exists, a qualified medical, or mental health professional shall conduct a complete evaluation.
8. Detainees with serious mental illness may not be automatically placed in an SMU on the basis of such mental illness. Every effort shall be made to place detainees with serious mental illness in a setting in or outside of the facility in which appropriate treatment can be provided, rather than an SMU, if separation from the general population is necessary.
 9. The status of detainees in SMUs shall be reviewed by supervisory staff in accordance with required time schedules, and the results of those reviews shall be documented.
 10. A detainee shall remain in disciplinary segregation for no more than 30 days per incident, except in extraordinary circumstances, such as incidents involving violations of offenses 100 through 109 listed in the “Greatest” offense category in Appendix 3.1.A, and his/her status shall be reviewed by the facility administrator after the first 30 days and each 30 days thereafter, to determine whether continued detention in disciplinary segregation is warranted.
 11. Detainees in SMU shall be afforded basic living conditions that approximate those provided to the general population, consistent with the safety and security considerations that are inherent in more controlled housing, and in consideration of the purpose for which each detainee is segregated.
 12. In general, when a detainee in an SMU is deprived of any usually authorized items or activity, a report of the action shall be forwarded to the facility administrator for notice and review.
 13. Detainees in SMU shall have regular access to supervisory, management, program and health care staff.
 14. Each detainee in an SMU shall be offered individual recreation or appropriate group recreation time, unless documented security, safety, or medical considerations dictate otherwise.
 15. Detainees in SMU shall be able to write, send and receive mail and correspondence as they would otherwise be able to do while detained within the general population.
 16. Detainees in SMU shall be provided opportunities for general visitation, including legal visitation, unless there are substantial, documented reasons for withholding those privileges.
 17. Detainees in SMU shall have access to personal legal materials, law library materials and legal visits, in accordance with provisions in the PBNDS.
 18. Detainees in SMU shall have access to telephones, in accordance with provisions in the PBNDS.
 19. Detainees in SMU shall have access to programs and services such as commissary, library, religious guidance and recreation, in accordance with provisions in the PBNDS.
 20. Detailed records shall be maintained on the circumstances related to a detainee’s confinement to the SMU, through required permanent SMU logs and individual detainee records.
 21. The facility shall provide communication assistance to detainees with disabilities and detainees who are limited in their English proficiency (LEP). The facility will provide detainees with disabilities with effective communication, which may include the provision of auxiliary aids, such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, as needed. The facility will also provide detainees who are LEP with language assistance,

including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

III. Standards Affected

This detention standard replaces “Special Management Unit (Administrative Segregation)” and “Special Management Unit (Disciplinary Segregation),” both dated 12/2/2008.

IV. References

American Correctional Association, *Performance-based Standards for Adult Local Detention Facilities*, 4th Edition: 4-ALDF-2A-44 through 2A-66.

ICE/ERO *Performance-based National Detention Standards 2011*:

- “2.4 Facility Security and Control”;
- “2.6 Hold Rooms in Detention Facilities”;
- “2.10 Searches of Detainees”;
- “2.13 Staff-Detainee Communication”;
- “3.1 Disciplinary System”;
- “4.5 Personal Hygiene”;
- “4.6 Significant Self-harm and Suicide Prevention and Intervention”;
- “5.1 Correspondence and Other Mail”;
- “5.4 Recreation”;

- “5.6 Telephone Access”;
- “5.7 Visitation”; and
- “6.3 Law Libraries and Legal Material.”

“*Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities*,” 79 Fed. Reg. 13100 (Mar. 7, 2014).

V. Expected Practices

A. Placement in Administrative Segregation

Administrative Segregation status is a nonpunitive status in which restricted conditions of confinement are required only to ensure the safety of detainees or others, the protection of property, or the security or good order of the facility. For matters of safety and security, staff may have to take immediate action to control a detainee, including placement in administrative segregation.

Detainees in administrative segregation shall not be commingled with detainees in disciplinary segregation.

Each facility shall develop and follow written procedures, consistent with this standard, governing the management of its administrative segregation unit. These procedures should be developed in consultation with the Field Office Director having jurisdiction for the facility. These procedures must document detailed reasons for placement of an individual in administrative segregation. Detainees and the Field Office Director (or his designee) must be provided a copy of the administrative segregation order.

Prior to the detainee’s placement in administrative segregation, the facility administrator or designee shall review the case to determine whether administrative segregation is in fact warranted. The facility administrator may delegate to a supervisor the authority to place a detainee in administrative segregation.

1. Reasons for Placement in Administrative Segregation

A detainee may be placed in administrative segregation when the detainee's continued presence in the general population poses a threat to life, property, self, staff, or other detainees; for the secure and orderly operation of the facility; for medical reasons; or under other circumstances as set forth below. Some examples of incidents warranting a detainee's assignment to administrative segregation include, but are not limited to, the following.

- a. A detainee is awaiting an investigation or a hearing for a violation of facility rules. Pre-disciplinary hearing detention shall be ordered only as necessary to protect the security and orderly operation of the facility.
 - 1) Pre-disciplinary hearing detention is not to be used as a punitive measure.
 - 2) A detainee who demonstrates good behavior during pre-disciplinary hearing detention should be considered for release to the general population while awaiting his or her disciplinary hearing.
 - 3) Time served in pre-disciplinary hearing detention shall be deducted from any time ordered by the Institution Disciplinary Panel (IDP).
 - 4) Absent compelling circumstances, such as a pending criminal investigation, a detainee should not remain in pre-disciplinary hearing detention for a longer period of time than the maximum term of disciplinary segregation permitted for the most serious offense charged.
- b. A detainee is a threat to the security of the facility. The facility administrator may determine that a detainee's criminal record, past behavior at other institutions, behavior while in ICE/ERO detention, or other evidence is sufficient to warrant placement of the detainee in

administrative segregation.

- 1) As a general matter, a detainee should not be placed directly in administrative segregation as a security threat on the basis of the detainee's misconduct at that detention facility, in the absence of any disciplinary proceedings. Instead, the facility should address the misconduct through the facility's disciplinary processes, and may place the detainee in pre-disciplinary hearing detention pending the outcome of the disciplinary proceedings.
- 2) Continued placement in segregation based on prior behavior should be reviewed at the required intervals, taking into account the detainee's behavior while in segregation. The facility shall continue to consider, in coordination with the Field Office Director where necessary, whether there are more appropriate alternatives to segregation, such as medium- to maximum-security general population housing units either within the facility or elsewhere.
- 3) Copies of records supporting this action shall be attached to the administrative segregation order.
- c. A detainee requires protection. Protective custody may be initiated at the detainee's request or by staff as needed to protect the detainee from harm. Each facility shall develop procedures to consider continued placement in protective custody as well as provisions for release from protective custody when appropriate. Frequently, the types of detainees who require this type of treatment include, but are not limited to:
 - 1) victims of detainee assaults;
 - 2) detainee informants or witnesses (e.g., detainees who provide information to institutional staff or any law enforcement agency concerning improper or criminal activities by others);

- 3) sexual predators or other detainees charged with a heinous or notorious crime;
- 4) detainees who have been pressured by other detainees to participate in sexual activity;
- 5) detainees who refuse to enter the general population because of alleged intimidation from other detainees;
- 6) detainees who refuse to return to the general population, but who do not provide the reason for refusal;
- 7) detainees who appear to be in danger of bodily harm;
- 8) detainees who seek protection, claiming to be former law enforcement officers or to have held sensitive law enforcement positions, whether or not there is official information to verify the claim; or
- 9) detainees who request protective custody.

A detainee's age, disability, sex, sexual orientation, gender identity, race, color, national origin, or religion may not provide the sole basis for a decision to place the detainee in involuntary segregation. An individualized assessment must be made in each case.

Use of administrative segregation to protect detainees with special vulnerabilities, including detainees vulnerable to sexual abuse or assault, shall be restricted to those instances where reasonable efforts have been made to provide appropriate housing and shall be made for the least amount of time practicable, and when no other viable housing options exist, and as a last resort.

Detainees who have been placed in administrative segregation for protective custody shall have access to programs, services, visitation, counsel and other services available to the general population to the

maximum extent possible.

- d. A detainee is scheduled for release, removal, or transfer within 24 hours. Such segregation may be ordered for security reasons or for the orderly operation of the facility.
- e. The IDP may recommend a detainee be placed in administrative segregation following disciplinary segregation if it determines that releasing the detainee into the general population would pose a threat to the detainee or security and orderly operation of the facility. However, a subsequent placement in administrative segregation requires an administrative segregation order justifying the placement after the completion of the term served in disciplinary segregation, with the detainee's behavior while in disciplinary segregation being taken into account.
- f. A detainee transferred from disciplinary segregation to administrative segregation shall enjoy the same privileges as all other detainees in administrative segregation, provided receipt of such privileges poses no threat to the safety, security, or orderly operation of the facility.
- g. A medical professional who ordered a detainee removed from the general population shall complete and sign an administrative segregation order (see below), unless the detainee is to stay in the medical department's isolation ward.

2. Administrative Segregation Order

A written order shall be completed and approved by the facility administrator or designee before a detainee is placed in administrative segregation, except when exigent circumstances make such documentation impracticable. In such cases, an order shall be prepared as soon as possible.

- a. Prior to a detainee's actual placement in administrative segregation, the facility administrator or designee shall complete the administrative segregation order (Form I-885 or equivalent), detailing the reasons for placing a

detainee in administrative segregation.

- b. In an emergency, the detainee's placement in administrative segregation may precede the paperwork, which the facility administrator or designee shall prepare as soon as possible after the detainee's placement.
- c. All memoranda, medical reports and other relevant documents shall be attached to the administrative segregation order.
- d. If the segregation is ordered for protective custody purposes, the order shall state whether the detainee requested the segregation, and whether the detainee requests a hearing concerning the segregation.
- e. The administrative segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

- f. A copy of the administrative segregation order shall also be immediately provided to the Field Office Director or his designee.
- g. The order shall remain on file with the SMU until the detainee is returned to the general population.
- h. When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the administrative segregation order. The completed order shall then be forwarded to the Chief of Security for inclusion in the detainee's detention file.

3. Review of Detainee Status in Administrative Segregation

All facilities shall implement written procedures for the regular review of all detainees held in administrative segregation, consistent with the procedures specified below.

- a. A supervisor shall conduct a review within 72 hours of the detainee's placement in administrative segregation to determine whether segregation is still warranted.
 - 1) The review shall include an interview with the detainee.
 - 2) A written record shall be made of the decision and the justification. The administrative segregation review (Form I-885) shall be used for the review.
 - 3) If the detainee has been segregated for his/her own protection, but not at the detainee's request, the signature of the facility administrator or assistant facility administrator is required on the Form I-885 to authorize the alien's continued detention.
- b. A supervisor shall conduct an identical review after the detainee has spent seven days in administrative segregation, and every week thereafter, for the first 30 days and every 10 days thereafter, at a minimum.
- c. The review shall include an interview with the detainee, and a written record shall be made of the decision and its justification.
- d. When the reviewing authority concludes that the detainee should be removed from administrative segregation, he/she shall submit that recommendation to the facility administrator (or designee) for approval.
- e. A copy of the decision and justification for each review shall be given to the detainee unless, in exceptional circumstances, this provision would jeopardize the facility's safety, security, or orderly

operations. The detainee shall also be given an opportunity to appeal a review decision to the facility administrator.

- f. After seven consecutive days in administrative segregation, the detainee may exercise the right to appeal the conclusions and recommendations of any review conducted to the facility administrator. The detainee may use any standard form of written communication, for example, a detainee request, to file the appeal.
- g. If a detainee has been in administrative segregation for more than 30 days and objects to that status, the facility administrator shall review the case to determine whether that status should continue. This review shall take into account the detainee's views and shall result in a written record of the decision and its justification. A similar review shall take place each 30 days thereafter.

A multi-disciplinary committee of facility staff, including facility leadership, medical and mental health professionals, and security staff, shall meet weekly to review all detainees currently housed in the facility's SMU. During the meeting, the committee shall review each detainee individually to ensure all staff are aware of the detainee's status, current behavior, and physical and mental health, and to consider whether any change in status is appropriate. Upon the request of the Field Office Director, the facility administrator shall permit ICE/ERO personnel to participate in the weekly meetings, either in person or by teleconference.

B. Placement in Disciplinary Segregation

To provide detainees in the general population a safe and orderly living environment, facility authorities may discipline anyone whose behavior does not comply with facility rules and regulations. Such discipline may involve temporary confinement in the SMU, apart from the general population. A detainee may be placed in disciplinary segregation only by

order of the IDP, or its equivalent, after a hearing in which the detainee has been found to have committed a prohibited act and only when alternative dispositions may inadequately regulate the detainee's behavior.

1. Duration

The maximum sanction is 30 days in disciplinary segregation per incident, except in extraordinary circumstances, such as incidents involving violations of offense 100 through 109 listed in the "Greatest" offense category in Appendix 3.1.A. After the first 30 days, and each 30 days thereafter, the facility administrator shall send a written justification for the continued segregation to the Field Office Director.

2. Disciplinary Segregation Order

A written order shall be completed and signed by the chair of the IDP (or disciplinary hearing officer) before a detainee is placed into disciplinary segregation.

- a. Prior to a detainee's actual placement in disciplinary segregation, the IDP chairman shall complete the disciplinary segregation order (Form I-883 or equivalent), detailing the reasons for placing a detainee in disciplinary segregation. All relevant documentation must be attached to the order.
- b. The completed disciplinary segregation order shall be immediately provided to the detainee in a language or manner the detainee can understand, unless delivery would jeopardize the safe, secure, or orderly operation of the facility.

All written materials provided to detainees shall generally be translated into Spanish. Where practicable, provisions for written translation shall be made for other significant segments of the population with limited English proficiency.

Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.

The order shall remain on file with the SMU until the detainee is returned to the general population.

- c. When the detainee is released from the SMU, the releasing officer shall indicate the date and time of release on the disciplinary segregation order. The completed order shall then be forwarded to the Chief of Security for inclusion in the detainee's detention file.

3. Review of Detainee Status in Disciplinary Segregation

All facilities shall implement written procedures for the regular review of all disciplinary segregation cases, consistent with the following procedures:

- a. A security supervisor, or the equivalent, shall interview the detainee and review his/her status in disciplinary segregation every seven days to determine whether the detainee:
 - 1) Abides by all rules and regulations; and,
 - 2) Is provided showers, meals, recreation and other basic living standards, as required by this detention standard.
- b. The supervisor shall document his/her findings after every review, by completing a disciplinary segregation review (Form I-887).
 - 1) The supervisor may recommend the detainee's early release from the SMU upon finding that time in disciplinary segregation is no longer necessary to regulate the detainee's behavior.
 - 2) An early-release recommendation must have the facility administrator's approval before the detainee may be returned to the general population. In conducting this review, the facility administrator will consider any request by the detainee to present written evidence or available witnesses. The review shall take into account the detainee's views.
 - 3) The supervisor may shorten, but not extend, the original sanction.

- 4) All review documents shall be placed in the detainee's detention file.
- 5) After each formal review, the detainee shall be given a written copy of the reviewing officer's decision and the basis for his/her finding, unless such a copy may result in a compromise of institutional security. If a written copy cannot be delivered, the detainee shall be advised of the decision orally, and the detention file shall so note, identifying the reasons why the notice was not provided in writing.
- c. The facility administrator shall review the status of a detainee in disciplinary segregation after the first 30 days of segregation, and each 30 days thereafter, to determine whether continued detention in disciplinary segregation is warranted.

A multi-disciplinary committee of facility staff, including facility leadership, medical and mental health professionals, and security staff, shall meet weekly to review all detainees currently housed in the facility's SMU. During the meeting, the committee shall review each detainee individually to ensure all staff are aware of the detainee's status, current behavior, and physical and mental health, and to consider whether any change in status is appropriate. Upon the request of the Field Office Director, the facility administrator shall permit ICE/ERO personnel to participate in the weekly meetings, either in person or by teleconference.

C. Notifying ICE of Segregation Placements and Facilitating ICE Review

1. Extended Segregation Placements

The facility administrator must notify the appropriate Field Office Director in writing whenever an ICE detainee has been held continuously in segregation for:

- a. 14 days, or 14 days out of any 21 day period;
- b. 30 days; and

- c. At every 30-day interval thereafter.

2. Immediate Notifications

The facility administrator must notify the appropriate Field Office Director in writing as soon as possible, but no later than 72 hours after the initial placement of an ICE detainee in segregation if:

- a. The detainee has been placed in administrative segregation on the basis of a disability, medical or mental illness, or other special vulnerability, or because the detainee is an alleged victim of a sexual assault, is an identified suicide risk, or is on a hunger strike; or
- b. A detainee placed in segregation for any reason has a mental illness, a serious medical illness, a serious physical disability, or is pregnant or recently had a miscarriage.

For the purposes of this standard, detainees with special vulnerabilities include those:

- a. Who are known to be suffering from mental illness or serious medical illness;
- b. Who have a disability or are elderly, pregnant, or nursing;
- c. Who would be susceptible to sexual abuse or assault in the general population;
- d. Who would be susceptible to harm in the general population due in part to their sexual orientation or gender identity; or
- e. Who have been victims – in or out of ICE custody – of sexual assault, torture, trafficking, or abuse.

3. Updates to Segregation Status

The facility administrator must also notify the appropriate Field Office Director in writing whenever a detainee who has been the subject of a prior notification pursuant to this section is subsequently released from segregation.

4. Coordination with Field Offices in Reviewing Segregation Placements

The facility administrator shall provide all information and supporting documentation regarding segregation placements as requested by the Field Office Director. The facility administrator shall also coordinate with the Field Office Director in:

- a. considering whether a less restrictive housing or custodial option is appropriate and available, including return to the general population or options to limit isolation while housed in the SMU, such as additional out of cell time and the ability to participate in group activities; and
- b. recommending whether transfer may be appropriate to a hospital or to another facility where the detainee can be housed in the general population or in an environment better suited to the needs of the detainee, such as a facility that has dedicated medical beds in its clinic, a medical observation unit, a facility that has a dedicated protective custody unit, or a facility that has a Special Management Unit with enhanced privileges.

D. Logs and Records

1. Permanent SMU Log

A permanent log shall be maintained in the SMU to record all activities concerning SMU detainees (e.g., meals served, recreational time, visitors, etc.).

The SMU log shall record the detainee's name, A-number, housing location, date admitted, reasons for admission, status review dates, tentative release date (for detainees in disciplinary segregation), the authorizing official, and date released. These logs shall also be used by supervisory staff and other officials to record their visits to the unit.

2. Visitors' Log

A separate log shall be maintained in the SMU of all

persons visiting the unit. This separate record shall include notation of:

- a. the time and date of the visit, and
- b. any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file.

3. Special Management Housing Unit Record

The Special Management Housing Unit Record or comparable form shall be prepared immediately upon the detainee's placement in the SMU.

- a. The special housing unit officer shall immediately record:
 - 1) whether the detainee ate, showered, recreated and took any medication; and
 - 2) any additional information, such as whether the detainee has a medical condition, or has exhibited suicidal/assaultive behavior.
 - 3) the officer that conducts the activity shall print his/her name and sign the record.
- b. The facility medical officer shall sign each individual's record when he/she visits a detainee in the SMU. The housing officer shall initial the record after the medical visits are completed, but no later than the end of the shift.
- c. A new form must be created for each week the detainee is in the SMU. The completed weekly forms shall be retained at the SMU until the detainee is released from the SMU.
- d. Upon a detainee's release from the SMU, the releasing officer shall attach that detainee's entire housing unit record to either the administrative segregation order or disciplinary segregation order and forward it to the Chief of Security or equivalent for inclusion into the detainee's detention file.

E. Basic Requirements for All Special Management Units

Conditions of confinement are based on the amount of supervision required to control a detainee and to safeguard the detainee, other detainees and facility staff.

In every instance, any exceptions to these requirements shall be:

1. made only for the purpose of ensuring detainee and facility staff safety and security (i.e., not for purposes of punishment);
2. approved by a supervisor (or higher official);
3. on a temporary and situational basis, continued only for as long as it is justified by threat to the safety or security of the facility, its staff, or detainee population; and
4. documented in the Permanent SMU Unit log and, under circumstances specified later in this detention standard, documented in a memo which shall be placed in the individual detainee's detention file.

When a detainee in an SMU is deprived of any usual authorized items or activity, a report of the action shall be forwarded to the facility administrator for review. This report shall be made part of the detainee's detention file.

Placement in an SMU does not constitute a valid basis for the use of restraints while in the SMU or during movement around the facility. Consistent with Standard 2.15, restraints should only be used if necessary as a precaution against escape during transfer, for medical reasons (when directed by the medical officer), or to prevent self-injury, injury to others, or serious property damage.

F. Translation/Interpretation Services

Detainees shall be provided translation or interpretation services while in the SMU, to assist with their understanding of the reason and conditions of confinement as well as their rights and

responsibilities while in confinement.

G. Special Needs

Detainees in the SMU shall be provided appropriate accommodations and professional assistance for disabilities and/or other special needs (e.g., medical, therapeutic, or mental health treatment), on an equal basis as those in the general population.

H. Control of Contraband and Tools

In accordance with procedures detailed in standard “2.4 Facility Security and Control,” each facility administrator is required to establish written policy and procedures to control and secure SMU entrances, contraband, tools and food carts.

I. Cell Occupancy

Ordinarily, the number of detainees confined to each cell or room may not exceed the capacity for which it was designed. Under exigent circumstances, before approving any additional cell occupancy on a temporary basis, the facility administrator shall consult with ICE/ERO Detention Management Division, who shall consult with DHS/ICE legal counsel. If a decision is made to approve such additional cell occupancy, a report of the action shall be filed with the facility and with the Field Office Director.

J. Cell Condition

Cells and rooms used for purposes of segregation must be well ventilated, adequately lit, appropriately heated/cooled and maintained in a sanitary condition at all times in accordance with the standards for general population, consistent with safety and security.

1. All SMU cells must be equipped with beds that are securely fastened to the cell floor or wall. SMU cells must also be conducive to maintaining a safe and secure environment for all detainees, with particular emphasis on allowing for full visibility and appropriate observation by staff and

wherever possible on eliminating potential safety hazards such as sharp edges and anchoring devices.

2. Conditions for close observation in a “dry cell” without water are detailed in standard “2.10 Searches of Detainees.”

K. Personal Property

Each facility shall issue guidelines in accordance with this standard concerning the property detainees may retain in each type of segregation. Generally, detainees in disciplinary segregation shall be subject to more stringent personal property restrictions and control than those in administrative segregation, given the non-punitive nature of administrative segregation.

L. Privileges

Each facility shall issue guidelines in accordance with this standard concerning the privileges detainees may have in each type of segregation.

1. Administrative Segregation

Generally, these detainees shall receive the same privileges available to detainees in the general population, consistent with any safety and security considerations for detainees, facility staff and security.

When space and resources are available, detainees in administrative segregation may be provided opportunities to spend time outside their cells (in addition to the required recreation periods), for such activities as socializing, watching TV and playing board games, and may be assigned to work details (e.g., as orderlies in the SMU).

2. Disciplinary Segregation

Generally, these detainees shall have fewer privileges than other detainees in either the general population or in administrative segregation. More specifically, they are subject to more stringent personal property control including, but not limited to, limitations on

their reading material and television viewing (which may be completely terminated), and restricted commissary or vending machine purchases.

M. Close Supervision

Detainees in SMU shall be personally observed and logged at least every 30 minutes on an irregular schedule. For cases that warrant increased observation, the SMU personnel shall personally observe detainees accordingly. (See also standard “4.6 Significant Self-harm and Suicide Prevention and Intervention” and the “Dry Cells” section in standard “2.10 Searches of Detainees.”)

N. Supervisory and Staff Visits

In addition to the direct supervision performed by unit staff:

1. The shift supervisor shall see each segregated detainee daily, including on weekends and holidays.
2. The facility administrator (or designee) shall visit each SMU daily.
3. Program staff may visit a detainee upon his/her request.

The facility administrator may require other staff to visit each detainee daily.

O. Specialized Training

Assignments of dedicated and specially trained security staff to SMUs permit staff to have both an improved understanding of the nature of the population and a greater familiarity with particular detainees. Interactions with security staff may be the primary human contact regularly afforded to detainees, and positive communications with security staff can reduce violence and are also important to the well-being of segregated detainees. Adequate training and supervision can ensure that all staff assigned to SMUs live up to this principle.

Security staff assigned to SMU shall receive specialized training in relevant topics, such as:

1. Identifying signs of mental health decompensation;
2. Techniques for more appropriate interactions with mentally ill detainees;
3. The impact of isolation; and
4. De-escalation techniques.

P. Health Care

Detainees must be evaluated by a medical professional prior to placement in an SMU (or when that is infeasible, as soon as possible and no later than within 24 hours of placement). The assessment should include a review of whether the detainee has been previously diagnosed as having a mental illness.

Health care personnel shall conduct face-to-face medical assessments at least once daily for detainees in an SMU. Where reason for concern exists, assessments shall be followed up with a complete evaluation by a qualified medical or mental health professional, and indicated treatment.

Medical visits shall be recorded on the SMU housing record or comparable form, and any action taken shall be documented in a separate logbook. The facility shall provide out-of-cell, confidential psychological assessments and visits for detainees whenever possible, to ensure patient privacy and to eliminate barriers to treatment.

Mental health staff shall conduct a face-to-face psychological review of all detainees in an SMU at least once every 30 days.

Detainees with a medical or mental illness, or identified as being a suicide risk or on a hunger strike shall be removed from segregation if IHSC or facility medical staff determine that the segregation placement has resulted in deterioration of the detainee's medical or mental health, and an appropriate alternative is available.

1. Detainees with Serious Mental Illnesses

Detainees with a serious mental illness, disorder or

condition (SMI), as defined in Standard 4.3 “Medical Care”, may not be automatically placed in an SMU on the basis of such mental illness. Every effort shall be made to place detainees with an SMI in a setting in or outside of the facility in which appropriate treatment can be provided, rather than an SMU, if separation from the general population is necessary.

The facility shall coordinate with the Field Office Director in seeking alternatives to SMU housing for detainees with an SMI, potentially including transfer to a hospital or to another facility.

For any detainee with an SMI placed in restrictive housing:

1. Mental health staff shall conduct a mental health consultation within 72 hours of the detainee’s placement in restrictive housing;
2. A multi-disciplinary committee of facility staff, including facility leadership, medical and mental health professionals, and security staff, shall meet weekly to review the detainee’s placement in restrictive housing;
3. At least weekly, a mental health provider shall conduct face-to-face clinical contact with the detainee, to monitor the detainee’s mental health status, identify signs of deterioration, and recommend additional treatment as appropriate.

The facility shall seek to develop enhanced opportunities for in-cell and out-of-cell therapeutic activities and additional unstructured out-of-cell time for detainees with an SMI, to the extent such activities can be conducted while ensuring the safety of the detainee, staff, and other detainees.

2. Pregnant Detainees

Women who are pregnant, who are post-partum, who recently had a miscarriage, or who recently had a terminated pregnancy should as a general matter not be placed in an SMU. In very rare situations, a woman who is pregnant, is postpartum, recently had a miscarriage, or recently had a terminated

pregnancy may be placed in an SMU as a response to behavior that poses a serious and immediate risk of physical harm, or if the detainee has requested to be placed in protective custody administrative segregation and there are no more appropriate alternatives available. Even in such cases, this decision must be approved by a representative of the detention facility administration, in consultation with a medical professional, and must be reviewed every 48 hours.

Q. Meals

Detainees in SMU shall be provided three nutritionally adequate meals per day, according to the general population meal schedule and ordinarily from the same menu. Deviation from meals served to the general population must be documented, including an explanation as to why SMU did not receive the same meal.

R. Clothing and Personal Hygiene

In accordance with standard “4.5 Personal Hygiene,” detainees in SMU may shave and shower at least three times weekly and receive other basic services such as laundry, hair care, barbering, clothing, bedding and linen equivalent to general population detainees and consistent with safety and security of the facility.

1. As needed, staff shall provide toilet tissue, a wash basin, tooth brush and shaving utensils, and may issue retrievable kits of toilet articles.
2. A detainee may be denied such items as clothing, mattress, bedding, linens, or pillow for medical or mental health reasons if his/her possession of such items raises concerns for detainee safety and/or facility security.
 - a. All denials of such items shall be documented.
 - b. If a detainee is so disturbed that he/ she is likely to destroy clothing or bedding, or create a disturbance by risking harm to self or others, the medical department shall be notified

immediately and a regimen of treatment and control shall be instituted by the medical staff, as necessary.

- c. Extreme detainee behavior, such as destroying clothing or bedding or harmful behavior to self or others, must be documented, made part of the detainee's file with the facility, and reported to the Field Office Director to implement necessary efforts to protect and care for the detainee.

S. Correspondence

In accordance with standard "5.1 Correspondence and Other Mail," detainees in an SMU may write, send and receive letters and other correspondence, in a manner similar to those housed in the facility's general population.

T. Visitation

In accordance with standard "5.7 Visitation," while in an SMU, a detainee ordinarily retains visiting privileges.

Segregated detainees may ordinarily use the visiting room during normal visiting hours. However, the facility may restrict or disallow visits for a detainee who violates visitation rules or whose behavior otherwise indicates the detainee would be a threat to the security or the good order of the visiting room.

1. Visitation may be restricted or disallowed when a detainee in administrative segregation is charged with, or has been found to have committed a prohibited act related to visiting privileges, or has otherwise acted in a way that would reasonably indicate that he/she would be a threat to the orderliness or security of the visiting room.
2. Under no circumstances may detainees participate in visitation while in restraints. If the detainee's behavior warrants restraints, the visit may not be granted under general population visiting conditions.
3. Where visits are restricted or disallowed, a report

shall be filed with the facility administrator and ICE/ERO, and made part of the detainee's file.

4. Detainees in protective custody, and violent and disruptive detainees, shall not use the visitation room during normal visitation hours. In cases in which a visit would present an unreasonable security risk, visits may be disallowed for a particular detainee.

U. Legal Visits

In accordance with standard "5.7 Visitation," detainees in SMU may not be denied legal visitation. However, the facility administrator or designee may implement whatever security precautions are necessary to protect the detainee and visitors and maintain good order. In such cases, staff shall advise legal service providers and assistants of any security concerns as soon as possible.

V. Religious Guidance

In accordance with standard "5.5 Religious Practices," detainees in an SMU shall be permitted to participate in religious practices, consistent with the safety, security, and orderly operation of the facility.

Detainees in an SMU shall be allowed visits by members of the clergy or other religious service providers, upon request, unless the supervisor determines that such a visit presents a safety or security risk or would interfere with the orderly operation of the facility. Violent or uncooperative detainees may be temporarily denied access to religious guidance. Staff shall advise the religious service provider of the detainee's present state of behavior before he/she agrees to visit the detainee.

Each facility shall develop procedures to allow detainees to retain religious items within their possession (e.g., religious wearing apparel, religious headwear, prayer rugs, beads, prayer rocks, medallions) consistent with good security practices. (See also standard "5.5 Religious Practices").

W. Reading Materials (Non-Legal)